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

Illinois Republican Party

ADDRESS (number and street)

P.O. Box 64897

☐ Check if different than previously reported. (ACC)

Chicago | IL | 60664 –

2. **FEC IDENTIFICATION NUMBER** — CITY — STATE — ZIPCODE

C00005926

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 (12G)

Election on ____ in the State of ____

(d) 30-Day **Post** -Election Report for the: ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on 11 02 2010 in the State of IL

5. Covering Period 10 14 2010 through 11 22 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: Dave Syverson, Treasurer

Signature of Treasurer: Electronically Filed by Dave Syverson, Treasurer — Date 04 19 2011

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period: From: MM 10 DD 14 YYYY 2010 To: MM 11 DD 22 YYYY 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 YYYY 2010		115300.74
(b) Cash on Hand at Begining of Reporting Period	319959.40	
(c) Total Receipts (from Line 19)	804963.01	2347715.28
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1124922.41	2463016.02
7. Total Disbursements (from Line 31)	1086935.02	2425028.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37987.39	37987.39
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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period: From: M M 10 D D 14 Y Y Y Y 2010 To: M M 11 D D 22 Y Y Y Y 2010

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)	82052.00	382567.00
(ii) Unitemized	41547.26	285136.74
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	123599.26	667703.74
(b) Political Party Committees	0.00	500.00
(c) Other Political Committees (such as PACs)	351723.00	796139.58
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	475322.26	1464343.32
12. Transfers From Affiliated/Other Party Committees	256682.32	567031.43
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)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	5000.00	5000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	67958.43	311340.53
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	67958.43	311340.53
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	804963.01	2347715.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	737004.58	2036374.75

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	14812.51	105221.48
(ii) Non-Federal Share	55723.29	395832.23
(b) Other Federal Operating Expenditures	80561.63	447136.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	151097.43	948190.36
22. Transfers to Affiliated/Other Party Committees	35000.00	35000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	800.00	5800.00
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	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	25000.00	25000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	25000.00	30000.00
29. Other Disbursements	5100.00	10247.00
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	869937.59	1395791.27
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	869937.59	1395791.27
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1086935.02	2425028.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1031211.73	2029196.40

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	475322.26	1464343.32
34. Total Contribution Refunds (from Line 28(d))	25000.00	30000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	450322.26	1434343.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	95374.14	552358.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	95374.14	552358.13

SCHEDULE L (FEC Form 3X)
AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT
LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized (Use Schedule L-A)	50000.00	50000.00
b. Unitemized	0.00	0.00
c. Total	50000.00	50000.00
2. OTHER RECEIPTS	0.00	7500.00
3. TOTAL RECEIPTS (Add Lines 1c and 2)	50000.00	57500.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration	0.00	0.00
b. Voter ID	0.00	0.00
c. GOTV	0.00	0.00
d. Generic Campaign	0.00	0.00
e. Total	0.00	0.00
5. OTHER DISBURSEMENTS	54566.76	54746.76
6. TOTAL DISBURSEMENTS (Add Lines 4e and 5)	54566.76	54746.76
7. BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	7640.00	320.00
8. RECEIPTS (from Line 3)	50000.00	57500.00
9. SUBTOTAL (Add Lines 7 and 8)	57640.00	57820.00
10. DISBURSEMENTS (From Line 6)	54566.76	54746.76
11. ENDING CASH ON HAND (Subtract Line 10 From Line 9)	3073.24	3073.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 7 / 536

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
ABX Air PAC
Mailing Address 145 Hunter Dr
City: Wilmington State: OH Zip Code: 45177
FEC ID number of contributing federal political committee. C C00238311
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 1000.00
Date of Receipt M M 10 / D D 21 / Y Y Y Y 2010
Transaction ID: 01130.C321770
Amount of Each Receipt this Period 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
American Success PAC
Mailing Address 701 8th St NW Suite 500
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee. C C00336644
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 1000.00
Date of Receipt M M 11 / D D 15 / Y Y Y Y 2010
Transaction ID: 01201.C323048
Amount of Each Receipt this Period 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Biggert for Congress
Mailing Address PO Box 637
City: Hinsdale State: IL Zip Code: 60522-0637
FEC ID number of contributing federal political committee. C C00330241
Name of Employer: U.S. Government
Occupation: Congresswoman
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 10000.00
Date of Receipt M M 10 / D D 21 / Y Y Y Y 2010
Transaction ID: C321792
Amount of Each Receipt this Period 10000.00
Receipt
NOTE: TRANSFER

SUBTOTAL of Receipts This Page (optional) ..... ▶ **12000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 536

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Biggert for Congress
Mailing Address PO Box 637
City Hinsdale State IL Zip Code 60522-0637
FEC ID number of contributing federal political committee. C C00330241
Name of Employer U.S. Government
Occupation Congresswoman
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 20000.00

Date of Receipt 10 / 26 / 2010
Transaction ID: C321794
Amount of Each Receipt this Period 10000.00
Receipt
NOTE: TRANSFER

B.
Full Name (Last, First, Middle Initial)
Cantor for Congress
Mailing Address PO Box 17813
City Richmond State VA Zip Code 23226-7813
FEC ID number of contributing federal political committee. C C00355461
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 10 / 28 / 2010
Transaction ID: C322864
Amount of Each Receipt this Period 5000.00
Receipt
NOTE: TRANSFER

C.
Full Name (Last, First, Middle Initial)
Caterpillar Employees
Mailing Address Political Action Committee
100 N.E. Adams St.
City Peoria State IL Zip Code 61629-1430
FEC ID number of contributing federal political committee. C C00148031
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 10 / 21 / 2010
Transaction ID: 01130.C321769
Amount of Each Receipt this Period 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **20000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[ ] 11a [ ] 11b [X] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
CNA Citizens For Good Govt - State PAC
Mailing Address 333 S Wabash Ave
City: Chicago State: IL Zip Code: 60604-4107
FEC ID number of contributing federal political committee. C C00078287
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 10 / D D 27 / Y Y Y Y 2010
Transaction ID: 01130.C321778
Amount of Each Receipt this Period 5000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Enterprise Rent-A-Car Company
Mailing Address Political Action Committee
600 Coporate Park Drive
City: Saint Louis State: MO Zip Code: 63105
FEC ID number of contributing federal political committee. C C00219642
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 10 / D D 27 / Y Y Y Y 2010
Transaction ID: 01130.C321781
Amount of Each Receipt this Period 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
ExelonPAC
Mailing Address P.O. Box 805379
City: Chicago State: IL Zip Code: 60680-5379
FEC ID number of contributing federal political committee. C C00141218
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 11 / D D 02 / Y Y Y Y 2010
Transaction ID: C322861
Amount of Each Receipt this Period 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) 15000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[ ] 11a [ ] 11b [X] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Friends Of John Boehner
Mailing Address 7908 Cincinnati Dayton Road
Suite 1
City: West Chester State: OH Zip Code: 45069
FEC ID number of contributing federal political committee. C C00237198
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2010
Transaction ID: 01201.C323049
Amount of Each Receipt this Period: 2000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Generation Y Fund Gop
Mailing Address PO Box 10555
City: Peoria State: IL Zip Code: 61612
FEC ID number of contributing federal political committee. C C00448191
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: M M 10 / D D 15 / Y Y Y Y 2010
Transaction ID: 01130.C321775
Amount of Each Receipt this Period: 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Growth And Prosperity PAC
Mailing Address 831 Linwood Ct
City: Birmingham State: AL Zip Code: 35222
FEC ID number of contributing federal political committee. C C00388793
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2010
Transaction ID: 01201.C323045
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **8000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[ ] 11a [ ] 11b [X] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
HALPAC
Mailing Address Hal Rogers, Honorary Chair
701 8th St NW
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee. C C00376038
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 / 15 / 2010
Transaction ID: 01201.C323044
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Home Depot Inc
Mailing Address 101 Constitution Ave NW
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee. C C00284885
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321783
Amount of Each Receipt this Period: 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Jobs, Economy & Budget Fund
Mailing Address Congressman Jeb Hensarling
7315 Wisconsin Ave
City: Bethesda State: MD Zip Code: 20814
FEC ID number of contributing federal political committee. C C00420695
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 11 / 15 / 2010
Transaction ID: 01201.C323047
Amount of Each Receipt this Period: 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **8500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 12 / 536

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Kinzinger for Congress
Mailing Address P.O. Box 1050
City: Bourbonnais State: IL Zip Code: 60914
FEC ID number of contributing federal political committee. C C00458877
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 25000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: C322858
Amount of Each Receipt this Period: 25000.00
Receipt
NOTE: TRANSFER

B.
Full Name (Last, First, Middle Initial)
Kinzinger for Congress
Mailing Address P.O. Box 1050
City: Bourbonnais State: IL Zip Code: 60914
FEC ID number of contributing federal political committee. C C00458877
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 30000.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: C322859
Amount of Each Receipt this Period: 5000.00
Receipt
NOTE: TRANSFER

C.
Full Name (Last, First, Middle Initial)
Kirk for Senate
Mailing Address PO Box 8
City: Winnetka State: IL Zip Code: 60093-0008
FEC ID number of contributing federal political committee. C C00350785
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 455308.68

Date of Receipt: 10 / 22 / 2010
Transaction ID: C322860
Amount of Each Receipt this Period: 190000.00
Receipt
NOTE: TRANSFER

SUBTOTAL of Receipts This Page (optional) ..... ▶ **220000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[ ] 11a [ ] 11b [X] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Pac Associated Builders
Mailing Address 4250 N Fairfax Dr
9th Floor
City: Arlington State: VA Zip Code: 22203
FEC ID number of contributing federal political committee. C C30001333
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 10 / D D 15 / Y Y Y Y 2010
Transaction ID: C321789
Amount of Each Receipt this Period 5000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
The Freedom Project
Mailing Address 631-B Pennsylvania Ave SE
City: Washington State: DC Zip Code: 20003
FEC ID number of contributing federal political committee. C C00305805
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 11 / D D 01 / Y Y Y Y 2010
Transaction ID: C322865
Amount of Each Receipt this Period 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
The Freedom Project
Mailing Address 631 B Pennsylvania Ave SE
City: Washington State: DC Zip Code: 20003
FEC ID number of contributing federal political committee. C C00305805
Name of Employer
Occupation
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt M M 11 / D D 15 / Y Y Y Y 2010
Transaction ID: 01201.C323050
Amount of Each Receipt this Period 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **15000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Tim Murphy For Congress
Mailing Address PO Box 24551
City: Pittsburgh State: PA Zip Code: 15234
FEC ID number of contributing federal political committee. C C00372201
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 / 15 / 2010
Transaction ID: 01201.C323046
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Tuesday Group Political Action Committee
Mailing Address PO Box 11586
City: Washington State: DC Zip Code: 20008-0786
FEC ID number of contributing federal political committee. C C00433060
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321782
Amount of Each Receipt this Period: 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
United Parcel Service, Inc PAC
Mailing Address 55 Glenlake PKWY NE
City: Atlanta State: GA Zip Code: 30328
FEC ID number of contributing federal political committee. C C00064766
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321777
Amount of Each Receipt this Period: 5000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **11000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[ ] 11a [ ] 11b [X] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address PO Box 661

City: Springfield
State: IL
Zip Code: 62705-0661

FEC ID number of contributing federal political committee.
C C00258855

Name of Employer

Occupation

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
69776.80

Date of Receipt
M M 1 0 / D D 2 6 / Y Y Y Y 2 0 1 0

Transaction ID: 01130.C321767

Amount of Each Receipt this Period
40000.00

Receipt

NOTE: TRANSFER

B.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address PO Box 661

City: Springfield
State: IL
Zip Code: 62705-0661

FEC ID number of contributing federal political committee.
C C00258855

Name of Employer

Occupation

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
46999.80

Date of Receipt
M M 1 1 / D D 1 0 / Y Y Y Y 2 0 1 0

Transaction ID: C322934

Amount of Each Receipt this Period
2223.00

In-Kind

Airfare - American Airlin-
es

SUBTOTAL of Receipts This Page (optional) ..... ▶ **42223.00**

TOTAL This Period (last page this line number only) ..... ▶ **351723.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Paul Alongi
Mailing Address 1 Bloomingdale Pl. Apt. 702
City: Bloomingdale State: IL Zip Code: 60108-1294
FEC ID number of contributing federal political committee. C
Name of Employer: MAAC Machinery Corp
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322325
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Timothy Andres
Mailing Address 425 Kungs Way
City: Joliet State: IL Zip Code: 60435-5393
FEC ID number of contributing federal political committee. C
Name of Employer: Joliet Catholic Academy
Occupation: Teacher
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322676
Amount of Each Receipt this Period: 60.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Ronald Arras
Mailing Address RR 2 Box 125
City: Greenfield State: IL Zip Code: 62044-9628
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Farmer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 215.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322947
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **410.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Helen Ayers
Mailing Address 724 E 1000 North Rd
City: Bement State: IL Zip Code: 61813-3715
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Housewife
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321666
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Carl Backer
Mailing Address 1106 Sunset Road
City: Winnetka State: IL Zip Code: 60093-3626
FEC ID number of contributing federal political committee. C
Name of Employer: Childrens Memorial Hospital
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322815
Amount of Each Receipt this Period: 150.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Kevin Baer
Mailing Address 5405 138th Pl
City: Crestwood State: IL Zip Code: 60445-1624
FEC ID number of contributing federal political committee. C
Name of Employer: CC Industries
Occupation: Accountant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322080
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Wayne Behrns
Mailing Address P.O. Box 14
City: Dieterich State: IL Zip Code: 62424-0014
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Production Agriculture
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01130.C322646
Amount of Each Receipt this Period: 30.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Benn
Mailing Address 1613 W Adams St
City: Springfield State: IL Zip Code: 62704-1503
FEC ID number of contributing federal political committee. C
Name of Employer: IL Dept. of Revenue
Occupation: Revenue Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321623
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
John Betts
Mailing Address 2500 Indigo Ln Unit 354
City: Glenview State: IL Zip Code: 60026-8307
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322702
Amount of Each Receipt this Period: 110.00
Receipt

SUBTOTAL of Receipts This Page (optional) 190.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
William Boyd
Mailing Address 3145 Elmhurst Dr.
City: Springfield State: IL Zip Code: 62704-5474
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321622
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Branz
Mailing Address PO Box 575
City: Herscher State: IL Zip Code: 60941-5009
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 520.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322477
Amount of Each Receipt this Period: 130.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Mary Ellen Brown
Mailing Address 26 Chateau Dr
City: Fairview Heights State: IL Zip Code: 62208-3605
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322363
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) 280.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Gregory Buffington
Mailing Address 1787B Glenwood Cir.
City: Sugar Grove State: IL Zip Code: 60554-2017
FEC ID number of contributing federal political committee. C
Name of Employer: Layne-Western Co
Occupation: General Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: 01130.C321757
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Ronald D. Bullock
Mailing Address 8 Blanchard Cir
City: South Barrington State: IL Zip Code: 60010-9515
FEC ID number of contributing federal political committee. C
Name of Employer: Bison Gear & Engineering
Occupation: Chairman & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322972
Amount of Each Receipt this Period: 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Jon Carlson
Mailing Address 38 Tartan Lakes Dr
City: Westmont State: IL Zip Code: 60559-6161
FEC ID number of contributing federal political committee. C
Name of Employer: Topi Capitol Mgt., LLC
Occupation: Investment Management
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322235
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1350.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Henry Chandler
Mailing Address 902 N Green Bay Rd
City: Lake Forest State: IL Zip Code: 60045-1736
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: C322333
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
James Claxton
Mailing Address 9800 Hillcrest Ln
City: Benton State: IL Zip Code: 62812
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C322221
Amount of Each Receipt this Period: 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
John Conrad
Mailing Address 703 Orchard Dr.
City: Macomb State: IL Zip Code: 61455-1122
FEC ID number of contributing federal political committee. C
Name of Employer: Western Illinois University
Occupation: Professor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 470.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321608
Amount of Each Receipt this Period: 110.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1610.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Theresa Couch
Mailing Address 3035 Lake Bluff Dr
City: Decatur State: IL Zip Code: 62521-4834
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Investor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321624
Amount of Each Receipt this Period: 200.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Newton Dodds
Mailing Address 19 Greencroft Dr.
City: Champaign State: IL Zip Code: 61821
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Contractor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322450
Amount of Each Receipt this Period: 200.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Garth Dorcy
Mailing Address 8933 Old Lebanon Troy Road
City: Lebanon State: IL Zip Code: 62254-2017
FEC ID number of contributing federal political committee. C
Name of Employer: State of Illinois
Occupation: Correctional Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 235.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C321829
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Denis Drennan
Mailing Address: 4 Milburn Park
City: Evanston State: IL Zip Code: 60201-1744
FEC ID number of contributing federal political committee: C
Name of Employer: DM Systems
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321643
Amount of Each Receipt this Period: 200.00
Receipt

B.
Full Name (Last, First, Middle Initial): Sandra Drury
Mailing Address: 1501 E. Prairie Ave
City: Wheaton State: IL Zip Code: 60187
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Housewife
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10 / 20 / 2010
Transaction ID: C321791
Amount of Each Receipt this Period: 10000.00
Receipt

C.
Full Name (Last, First, Middle Initial): Michael Dyer
Mailing Address: 952 Stone Creek Ln
City: Belleville State: IL Zip Code: 62223-2648
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322220
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 11200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
David Eades
Mailing Address 5 Lyndhurst Pl.
City: Champaign State: IL Zip Code: 61820-7712
FEC ID number of contributing federal political committee. C
Name of Employer: Regency Assoc.
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: C322309
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Ervin Erdoes
Mailing Address 3740 Lake Shore Drive, #15-A
City: Chicago State: IL Zip Code: 60613-4201
FEC ID number of contributing federal political committee. C
Name of Employer: University of Illinois
Occupation: Professor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322481
Amount of Each Receipt this Period: 150.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Thomas Faller
Mailing Address 3300 Hedley Rd
City: Springfield State: IL Zip Code: 62711-6384
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: C322137
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Patricia Fee
Mailing Address 1530 White Eagle Dr
City: Naperville State: IL Zip Code: 60564-9761
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: political consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1175.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322836
Amount of Each Receipt this Period: 200.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Thomas Fitzgibbon
Mailing Address 9640 Reding Cir
City: Des Plaines State: IL Zip Code: 60016-1551
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 310.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322171
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial)
William Frame
Mailing Address 959 Malinda Ct
City: Forsyth State: IL Zip Code: 62535-9637
FEC ID number of contributing federal political committee. C
Name of Employer: AAD LTD.
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 205.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322277
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Ronald Fraser
Mailing Address 2003 Cherokee Rd
City: Carpentersville State: IL Zip Code: 60110-1263
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C321842
Amount of Each Receipt this Period: 200.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Brian Gaston
Mailing Address 919 Bernard St
City: Alexandria State: VA Zip Code: 22314
FEC ID number of contributing federal political committee. C
Name of Employer: Glover Park Group
Occupation: Government AFFA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321780
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Marion Giles
Mailing Address 152 Brewster Lane
City: La Grange Park State: IL Zip Code: 60526-6004
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322675
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Alexander Goldin
Mailing Address 2374 Greenview Rd
City: Northbrook State: IL Zip Code: 60062-1157
FEC ID number of contributing federal political committee. C
Name of Employer: Ear, Nose, & Throat Center
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322826
Amount of Each Receipt this Period: 45.00
Receipt

B.
Full Name (Last, First, Middle Initial)
August Greidanus
Mailing Address 501 Cutters Mill Ln
City: Schaumburg State: IL Zip Code: 60194-4534
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Part-time Consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322219
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial)
James Griseto
Mailing Address 1 Oak Brook Club Dr Apt B201
City: Oak Brook State: IL Zip Code: 60523-8605
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C321914
Amount of Each Receipt this Period: 25.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **570.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
John Hagenah
Mailing Address 1101 Greenwood Ave.
City: Wilmette State: IL Zip Code: 60091-1619
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Architect
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322147
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Hardick
Mailing Address 6025 N Rockwell St
City: Chicago State: IL Zip Code: 60659-4006
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322217
Amount of Each Receipt this Period: 400.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Paul Harvey
Mailing Address 2994 Grant St
City: Evanston State: IL Zip Code: 60201
FEC ID number of contributing federal political committee. C
Name of Employer: UBS
Occupation: Investments
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322847
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Denise Henry
Mailing Address 7400 Park Terrace Dr
City: Alexandria State: VA Zip Code: 22307
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 20 / 2010
Transaction ID: 01130.C321741
Amount of Each Receipt this Period: 5000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Joel Hertz
Mailing Address PO Box 467
City: Monticello State: IL Zip Code: 61856-0467
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: C322896
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial)
William Heyen
Mailing Address 15528 Route 16
City: Gillespie State: IL Zip Code: 62033-3370
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Farmer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322538
Amount of Each Receipt this Period: 160.00
Receipt

SUBTOTAL of Receipts This Page (optional) 5260.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Jessie Hill
Mailing Address 1924 W. Ashbury Ln.
City: Inverness State: IL Zip Code: 60067-4796
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: C322900
Amount of Each Receipt this Period: 110.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Richard Hutchison
Mailing Address 16249 E 350th St
City: Orion State: IL Zip Code: 61273-9173
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Psychologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322054
Amount of Each Receipt this Period: 200.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Richard Hutchison
Mailing Address 16249 E 350th St
City: Orion State: IL Zip Code: 61273-9173
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Psychologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322939
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **410.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
William Jenks
Mailing Address 607 N Main St
City: Glen Ellyn State: IL Zip Code: 60137
FEC ID number of contributing federal political committee. C
Name of Employer: Gartner
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322053
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Calvin Johnson
Mailing Address 15055 W. 139th St.
City: Homer Glen State: IL Zip Code: 60491
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322115
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Ronald Jones
Mailing Address 100 Arboretum Dr
City: North Barrington State: IL Zip Code: 60010-6591
FEC ID number of contributing federal political committee. C
Name of Employer: Chicago Turf and Irrigati-on
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321635
Amount of Each Receipt this Period: 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Richard Kavanagh
Mailing Address: 401 Ashley Dr
City: New Lenox State: IL Zip Code: 60451-1165
FEC ID number of contributing federal political committee: C
Name of Employer: Dykema Gossett Reoks Pitts
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322958
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial): Mike Klemm
Mailing Address: 6500 Carlisle Bnd
City: Springfield State: IL Zip Code: 62711-6794
FEC ID number of contributing federal political committee: C
Name of Employer: Capitol City Speakers Bureau
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322061
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Mike Klemm
Mailing Address: 6500 Carlisle Bnd
City: Springfield State: IL Zip Code: 62711-6794
FEC ID number of contributing federal political committee: C
Name of Employer: Capitol City Speakers Bureau
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01202.C323064
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Mike Klemm
Mailing Address 6500 Carlisle Bnd
City: Springfield State: IL Zip Code: 62711-6794
FEC ID number of contributing federal political committee. C
Name of Employer: Capitol City Speakers Bureau
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: C322842
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Ronald Kramer
Mailing Address 2970 N Lake Shore Dr Apt 6B
City: Chicago State: IL Zip Code: 60657-5783
FEC ID number of contributing federal political committee. C
Name of Employer: Seyfarth Shaw
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00

Date of Receipt: 10 / 29 / 2010
Transaction ID: C322004
Amount of Each Receipt this Period: 110.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Herbert Landers
Mailing Address 309 Pearl Ave.
City: Loves Park State: IL Zip Code: 61111-5031
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322445
Amount of Each Receipt this Period: 130.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **340.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Delbert Leppke
Mailing Address 21 Calvin Cir
City: Evanston State: IL Zip Code: 60201-1911
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1727.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322819
Amount of Each Receipt this Period: 1647.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Edward Mack
Mailing Address 481 Grove St.
City: Glencoe State: IL Zip Code: 60022-1881
FEC ID number of contributing federal political committee. C
Name of Employer: Mack & Parker, Inc.
Occupation: Insurance- Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322492
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Edward Mack
Mailing Address 1804 Creekside Ct
City: Darien State: IL Zip Code: 60561
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322941
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2747.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
William Manns
Mailing Address PO Box 427
City: Burlington State: IL Zip Code: 60109
FEC ID number of contributing federal political committee. C
Name of Employer: St. Charles Trading
Occupation: President and Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 01130.C321784
Amount of Each Receipt this Period: 2000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Marsh
Mailing Address 27826 E. 1700 North Rd.
City: Saunemin State: IL Zip Code: 61769-6013
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Farmer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: C321825
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
J. Allen Martin
Mailing Address 10095 Lawyers Rd
City: Vienna State: VA Zip Code: 22181
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: 01130.C321740
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) 2550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 36 / 536

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): James Matson
Mailing Address: 210 Exmoor Ave
City: Glen Ellyn State: IL Zip Code: 60137
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 8000.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 01130.C321786
Amount of Each Receipt this Period: 8000.00
Receipt

B.
Full Name (Last, First, Middle Initial): George Maze
Mailing Address: 1710 2nd St.
City: Peru State: IL Zip Code: 61354
FEC ID number of contributing federal political committee: C
Name of Employer: American Nickeloid
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C321898
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial): Jonathan McCarthy
Mailing Address: 3531 N. Sheffield Ave., Unit 1S
City: Chicago State: IL Zip Code: 60657
FEC ID number of contributing federal political committee: C
Name of Employer: IDEX Corporation
Occupation: Tax manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322943
Amount of Each Receipt this Period: 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) 8550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Michael McDonnell
Mailing Address 1410 Forest Ave.
City: River Forest State: IL Zip Code: 60305-1002
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322686
Amount of Each Receipt this Period: 70.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John McGovern
Mailing Address 4147 Clausen Ave
City: Western Springs State: IL Zip Code: 60558-1230
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322906
Amount of Each Receipt this Period: 25.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Richard Meade
Mailing Address 702 Berry St
City: Falls Church State: VA Zip Code: 22042
FEC ID number of contributing federal political committee. C
Name of Employer: B*K*S*H & Assoc
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321776
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) 345.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 38 / 536

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Daniel Meyer
Mailing Address: 2506 Duxbury Pl
City: Alexandria State: VA Zip Code: 22308
FEC ID number of contributing federal political committee: C
Name of Employer: The Duberstein Group
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 21 / 2010
Transaction ID: 01130.C321768
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): Harvey Miller
Mailing Address: 485 East Half Day Rd
City: Buffalo Grove State: IL Zip Code: 60089
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322222
Amount of Each Receipt this Period: 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial): David Mills
Mailing Address: 3455 14th Street
City: Moline State: IL Zip Code: 61265
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 4000.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322929
Amount of Each Receipt this Period: 4000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
John Munger
Mailing Address 14 Dukes Ln
City: Lincolnshire State: IL Zip Code: 60069-3320
FEC ID number of contributing federal political committee. C
Name of Employer: Jansson Shupe & Munger Ltd
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322961
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial)
William Myers
Mailing Address 4106 Clubhouse Dr
City: Champaign State: IL Zip Code: 61822
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 15 / 2010
Transaction ID: 01130.C321774
Amount of Each Receipt this Period: 1000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
John ORourke
Mailing Address 11028 Stanmore Dr
City: Potomac State: MD Zip Code: 20854
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321779
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) 2100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Edward D. Oldis
Mailing Address: 98 Windmill Road
City: Orland Park State: IL Zip Code: 60467
FEC ID number of contributing federal political committee: C
Name of Employer: A W Chesterton
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322076
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial): Vesselin Oreshkov
Mailing Address: 5200 Eagle Rdg
City: Springfield State: IL Zip Code: 62711-7812
FEC ID number of contributing federal political committee: C
Name of Employer: Sang. Assoc. Anesthesiologist
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C321610
Amount of Each Receipt this Period: 150.00
Receipt

C.
Full Name (Last, First, Middle Initial): Peter Orum
Mailing Address: P.O. Box 384
City: St. Charles State: IL Zip Code: 60174-0384
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: General Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322404
Amount of Each Receipt this Period: 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 41 / 536

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Steven Pearson
Mailing Address: 1 S 370 Winfield Rd
City: Wheaton State: IL Zip Code: 60187
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322043
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): Russell Perkinson
Mailing Address: PO Box 65
City: Thawville State: IL Zip Code: 60968-0065
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Producer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: 01130.C322440
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Daniel Peterson
Mailing Address: 1939 Burr Oak Dr W
City: Glenview State: IL Zip Code: 60025-1803
FEC ID number of contributing federal political committee: C
Name of Employer: ZS Associates, Inc.
Occupation: Marketing Consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322279
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) 1350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Christopher Pfaff
Mailing Address 7 Briar Lane
City: Glencoe State: IL Zip Code: 60022
FEC ID number of contributing federal political committee. C
Name of Employer: UBS
Occupation: Financial Advisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322575
Amount of Each Receipt this Period: 125.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Wilbur Pflum
Mailing Address 117 Eldorado Drive
City: Tuscola State: IL Zip Code: 61953
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C321816
Amount of Each Receipt this Period: 60.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Neil Pobanz
Mailing Address PO Box 32
City: Lacon State: IL Zip Code: 61540-0032
FEC ID number of contributing federal political committee. C
Name of Employer: American Bonanza Society
Occupation: Consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322155
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 285.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Augustine Ponnezhan
Mailing Address 147 W. Cobblestone Drive
City: Crete State: IL Zip Code: 60417-6305
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Real Estate
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322057
Amount of Each Receipt this Period: 500.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Powell
Mailing Address 1100 N Edgehill Ct
City: West Peoria State: IL Zip Code: 61604-5134
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322197
Amount of Each Receipt this Period: 200.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Linda Powers
Mailing Address 1323 W Pratt Blvd # 3
City: Chicago State: IL Zip Code: 60626-4336
FEC ID number of contributing federal political committee. C
Name of Employer: CNA Corp.
Occupation: Government Relations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 315.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322036
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 800.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Thomas Rakow
Mailing Address PO Box 545
2407 Tall Oaks Dr
City: Elgin State: IL Zip Code: 60121-0545
FEC ID number of contributing federal political committee. C
Name of Employer: IHC Construction
Occupation: Contractor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 01130.C321785
Amount of Each Receipt this Period: 3000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Karl Rauschert
Mailing Address 24 Hillcrest Dr.
City: Bushnell State: IL Zip Code: 61422-9737
FEC ID number of contributing federal political committee. C
Name of Employer: MCP Corp.
Occupation: Manufacturer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322317
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial)
John Reed
Mailing Address 512 S Highland Ave
City: Champaign State: IL Zip Code: 61821-3913
FEC ID number of contributing federal political committee. C
Name of Employer: M.J. Reed Co.
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 15 / 2010
Transaction ID: 01130.C321772
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) 4000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Jane Reese
Mailing Address 23976 Stragecoach Road
City: Geneseo State: IL Zip Code: 61254
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322930
Amount of Each Receipt this Period: 5000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Scott Reichard
Mailing Address 107 Meadow Dr
City: Urbana State: IL Zip Code: 61801
FEC ID number of contributing federal political committee. C
Name of Employer: Benefit Planning Consulta- nts
Occupation: CPA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 15 / 2010
Transaction ID: 01130.C321773
Amount of Each Receipt this Period: 500.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Todd Ricketts
Mailing Address 510 Laurel Ave
City: Wilmette State: IL Zip Code: 60091
FEC ID number of contributing federal political committee. C
Name of Employer: Ram Investment
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: 01130.C321705
Amount of Each Receipt this Period: 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **8000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Todd Ricketts
Mailing Address 510 Laurel Ave
City: Wilmette State: IL Zip Code: 60091
FEC ID number of contributing federal political committee. C
Name of Employer: Ram Investment
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 7500.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322951
Amount of Each Receipt this Period: 5000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Jack Roeser
Mailing Address 522 Lake Shore Dr N
City: Barrington State: IL Zip Code: 60010-3524
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322044
Amount of Each Receipt this Period: 5000.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Michael Romano
Mailing Address 644 Dalewood Ln
City: Hinsdale State: IL Zip Code: 60521-4732
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322058
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **11000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): David Ross Gray
Mailing Address: 216 Hawley Ln
City: Geneva State: IL Zip Code: 60134
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: commodities and futures
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322042
Amount of Each Receipt this Period: 1000.00
Receipt

B.
Full Name (Last, First, Middle Initial): Robert Ryan
Mailing Address: 2026 N Newcastle Ave
City: Chicago State: IL Zip Code: 60707-3332
FEC ID number of contributing federal political committee: C
Name of Employer: TransUnion LLC
Occupation: VP Government Relations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322059
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Joshua Scheinfeld
Mailing Address: 107 South Ave
City: Glencoe State: IL Zip Code: 60022-1718
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Businessman
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 310.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C323038
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1200.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Wilbur Schwark
Mailing Address PO Box 1
City: Bonfield State: IL Zip Code: 60913-0001
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 205.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322234
Amount of Each Receipt this Period: 25.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Frank Schwermin
Mailing Address 1646 Huntington Ln.
City: Highland Park State: IL Zip Code: 60035-2714
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: 01130.C321758
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Irving Seaman
Mailing Address 666 N Sheridan Rd.
City: Lake Forest State: IL Zip Code: 60045-2341
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322488
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) 325.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
J. Clayton Shaw
Mailing Address 1400 Paramount Pkwy
City: Batavia State: IL Zip Code: 60510
FEC ID number of contributing federal political committee. C
Name of Employer: Information Requested
Occupation: Information Requested
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322041
Amount of Each Receipt this Period: 2000.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Ann Steffenhagen
Mailing Address 28264 N Gilmer Rd
City: Mundelein State: IL Zip Code: 60060-9538
FEC ID number of contributing federal political committee. C
Name of Employer: Northern IL Mack Inc.
Occupation: Clerical
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322704
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial)
George Suter
Mailing Address 2580 Greenwood
City: DeKalb State: IL Zip Code: 60115
FEC ID number of contributing federal political committee. C
Name of Employer: The Sutor Co. Inc
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1100.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: 01130.C321750
Amount of Each Receipt this Period: 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) 3100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Robert Thrun
Mailing Address: 246 Pheasant Lane
City: Bloomingdale State: IL Zip Code: 60108
FEC ID number of contributing federal political committee: C
Name of Employer: Anchor Products Company, Inc
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C323020
Amount of Each Receipt this Period: 200.00
Receipt

B.
Full Name (Last, First, Middle Initial): Robert Thrun
Mailing Address: 246 Pheasant Lane
City: Bloomingdale State: IL Zip Code: 60108
FEC ID number of contributing federal political committee: C
Name of Employer: Anchor Products Company, Inc
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C323040
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial): Leonard Tobey
Mailing Address: P.O. Box 588
City: Herscher State: IL Zip Code: 60941-0588
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Contractor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 440.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322542
Amount of Each Receipt this Period: 120.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **570.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Irene Tobin
Mailing Address: 1410 Sheridian Road
City: Wilmette State: IL Zip Code: 60091-1840
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: C322271
Amount of Each Receipt this Period: 100.00
Receipt

B.
Full Name (Last, First, Middle Initial): Irene Tobin
Mailing Address: 1410 Sheridian Road
City: Wilmette State: IL Zip Code: 60091-1840
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 29 / 2010
Transaction ID: 01130.C321755
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Paul Tucker
Mailing Address: 49 Trout Dr.
City: Highland State: IL Zip Code: 62249-1783
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C322839
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **450.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Oleg Vologin
Mailing Address 10050 La Crosse Ave
City: Skokie State: IL Zip Code: 60077-1008
FEC ID number of contributing federal political committee. C
Name of Employer: Rehabilitation Achievement Ctr
Occupation: Massage Therapist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 230.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: C322045
Amount of Each Receipt this Period: 50.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Oleg Vologin
Mailing Address 10050 La Crosse Ave
City: Skokie State: IL Zip Code: 60077-1008
FEC ID number of contributing federal political committee. C
Name of Employer: Rehabilitation Achievement Ctr
Occupation: Massage Therapist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C323034
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Oleg Vologin
Mailing Address 10050 La Crosse Ave
City: Skokie State: IL Zip Code: 60077-1008
FEC ID number of contributing federal political committee. C
Name of Employer: Rehabilitation Achievement Ctr
Occupation: Massage Therapist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322953
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **200.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 53 / 536

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Frank Voris
Mailing Address: 103 Fairfax Cir
City: Sugar Grove State: IL Zip Code: 60554-8104
FEC ID number of contributing federal political committee: C
Name of Employer: retired
Occupation: Banker
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2010
Transaction ID: C321904
Amount of Each Receipt this Period: 150.00
Receipt

B.
Full Name (Last, First, Middle Initial): Wayne Waggoner
Mailing Address: 1616 Cedar St # 19-D #19-D
City: Lawrenceville State: IL Zip Code: 62439-2154
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 575.00
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01130.C322647
Amount of Each Receipt this Period: 100.00
Receipt

C.
Full Name (Last, First, Middle Initial): Robert Wakefield
Mailing Address: 2804 24th St Unit 8
City: Rock Island State: IL Zip Code: 61201-5360
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired Bank President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322573
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **350.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Eileen Weicher
Mailing Address 537 N Euclid Ave
City: Oak Park State: IL Zip Code: 60302-1617
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Homemaker
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 / 09 / 2010
Transaction ID: 01130.C322949
Amount of Each Receipt this Period: 300.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Henry Wheeler
Mailing Address 10 N Mayflower Rd
City: Lake Forest State: IL Zip Code: 60045-2421
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01130.C322634
Amount of Each Receipt this Period: 150.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Lorraine Wink
Mailing Address 611 S. Oakland Ave.
City: Villa Park State: IL Zip Code: 60181-3077
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Retired
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 335.00
Date of Receipt: 10 / 25 / 2010
Transaction ID: C322707
Amount of Each Receipt this Period: 60.00
Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **510.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Barbara Winterland

Mailing Address 35317 E. 2550 N. Road

City: Colfax
State: IL
Zip Code: 61728-7511

FEC ID number of contributing federal political committee: C

Name of Employer: None
Occupation: Retired

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 600.00

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2010

Transaction ID: C322258

Amount of Each Receipt this Period: 100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Samuel Zell

Mailing Address 2 N Riverside Plaza

City: Chicago
State: IL
Zip Code: 60606-2600

FEC ID number of contributing federal political committee: C

Name of Employer: Equity Group Investments, LLC
Occupation: Chairman of the Board

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2010

Transaction ID: C322304

Amount of Each Receipt this Period: 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

TOTAL This Period (last page this line number only) ..... ▶ **82052.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 56 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First St., S.E.
City: Washington State: DC Zip Code: 20003-1801
FEC ID number of contributing federal political committee. C C00003418
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 475527.43
Date of Receipt: M M 10 / D D 20 / Y Y Y Y 2010
Transaction ID: C322857
Amount of Each Receipt this Period: 181200.00
Transfers From Affil./Auth.

B.
Full Name (Last, First, Middle Initial)
Target State Victory Fund
Mailing Address 228 S Washington St Ste 115
City: Alexandria State: VA Zip Code: 22314-
FEC ID number of contributing federal political committee. C C00487512
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 58907.66
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: C321793
Amount of Each Receipt this Period: 42885.98
Transfers From Affil./Auth.

C.
Full Name (Last, First, Middle Initial)
David Franasiak
Mailing Address 873 Coach Way
City: Annapolis State: MD Zip Code: 21401-
FEC ID number of contributing federal political committee. C
Name of Employer: Williams & Jensen, PLLC
Occupation: Attorney
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 333.33
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323071
Amount of Each Receipt this Period: 333.33
Transfer Memo

[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ **224085.98**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 57 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
George Vradenburg
Mailing Address 2901 Woodland Drive NW
City: Washington State: DC Zip Code: 20008-
FEC ID number of contributing federal political committee. C
Name of Employer: Vradenburg Foundation
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323087
Amount of Each Receipt this Period: 1000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
American Health Care Association 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: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323073
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
Alamo Pac
Mailing Address 919 Congress Avenue Suite 1400
City: Austin State: TX Zip Code: 78701-
FEC ID number of contributing federal political committee. C C00387464
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3846.15

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323079
Amount of Each Receipt this Period: 3846.15
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 58 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
American Assoc. Of Orthopedic Surgeons
Mailing Address 317 Massachusetts Ave. NE
City: Washington State: DC Zip Code: 20002-
FEC ID number of contributing federal political committee. C C00343137
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323072
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
KOCHPAC
Mailing Address 600 14th Street NW Suite 800
City: Washington State: DC Zip Code: 20005-
FEC ID number of contributing federal political committee. C C00236489
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323077
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
TBA Bank Pac
Mailing Address 203 W. 10th Street
City: Austin State: TX Zip Code: 78701-
FEC ID number of contributing federal political committee. C C00196444
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323078
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 59 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Medco Health Pac
Mailing Address: 2350 Kerner Blvd, Suite 250
City: San Rafael State: CA Zip Code: 94901-
FEC ID number of contributing federal political committee: C C00384362
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323074
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial): PriceWaterhouseCoopers PAC
Mailing Address: 1301 K Street NW, Suite 800 West
City: Washington State: DC Zip Code: 20005-
FEC ID number of contributing federal political committee: C C00107235
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1071.43
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323093
Amount of Each Receipt this Period: 1071.43
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial): Assoc.Of Private Section Colleges & Univ
Mailing Address: 1101 Connecticut Ave. NW, Suite 900
City: Washington State: DC Zip Code: 20036-
FEC ID number of contributing federal political committee: C C00213066
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323081
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 60 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Freedom Fund
Mailing Address 701 8th Street NW
Suite 500
City: Washington State: DC Zip Code: 20001-
FEC ID number of contributing federal political committee. C C00390674
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3571.43
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323080
Amount of Each Receipt this Period: 3571.43
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
International Franchise Association
Mailing Address 1501 K Street NW
Suite 350
City: Washington State: DC Zip Code: 20005-
FEC ID number of contributing federal political committee. C C00084491
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1071.43
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323076
Amount of Each Receipt this Period: 1071.43
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
Heartland Values PAC
Mailing Address P.O. Box 505
City: Sioux Falls State: SD Zip Code: 57101-
FEC ID number of contributing federal political committee. C C00409003
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2083.33
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323083
Amount of Each Receipt this Period: 2083.33
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 61 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Independent Insurance Agents&Brokers
Mailing Address 412 First Street SE
Suite 300
City: Washington State: DC Zip Code: 20003-
FEC ID number of contributing federal political committee. C C00022343
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323084
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Altria Group, Inc.
Mailing Address 101 Constitution Avenue NW
City: Washington State: DC Zip Code: 20001-
FEC ID number of contributing federal political committee. C C00089136
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 285.72
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323090
Amount of Each Receipt this Period: 285.72
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
McGuireWoods Federal PAC Fund
Mailing Address One James Cener
901 East Cary Street
City: Richmond State: VA Zip Code: 23219-
FEC ID number of contributing federal political committee. C C00225342
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14
Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323086
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 62 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
KPMG PAC
Mailing Address P.O. Box 18254
City: Washington State: DC Zip Code: 20036-
FEC ID number of contributing federal political committee. C C00280222
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1071.43
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323092
Amount of Each Receipt this Period: 1071.43
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Investment Company Institute PAC
Mailing Address 1401 H Street NW Suite 1200
City: Washington State: DC Zip Code: 20005-
FEC ID number of contributing federal political committee. C C00105981
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323085
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
Glaxosmithkline PAC
Mailing Address 5 Moore Drive
City: Durham State: NC Zip Code: 27709-
FEC ID number of contributing federal political committee. C C00199703
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 357.14
Date of Receipt: 10 / 26 / 2010
Transaction ID: 01202.C323091
Amount of Each Receipt this Period: 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 63 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Psychiatric Solutions Inc, PAC
Mailing Address 6640 Caruthers Parkway
Suite 500
City: Franklin State: TN Zip Code: 37067-
FEC ID number of contributing federal political committee. C C00407684
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 1100.00
Date of Receipt MM 10 / DD 26 / YYYY 2010
Transaction ID: 01202.C323075
Amount of Each Receipt this Period 1100.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Corinthian Colleges, Inc.
Mailing Address 6 Hulton Centre Drive
Suite 400
City: Santa Ana State: CA Zip Code: 92707-
FEC ID number of contributing federal political committee. C C00357640
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 357.14
Date of Receipt MM 10 / DD 26 / YYYY 2010
Transaction ID: 01202.C323082
Amount of Each Receipt this Period 357.14
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
National Association of Home Builders
Mailing Address 1201 15th Street NW
City: Washington State: DC Zip Code: 20005-
FEC ID number of contributing federal political committee. C C30001366
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt MM 10 / DD 26 / YYYY 2010
Transaction ID: 01202.C323089
Amount of Each Receipt this Period 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 64 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Making Business Excel PAC
Mailing Address P.O. Box 3241
City: Cheyenne State: WY Zip Code: 82003-
FEC ID number of contributing federal political committee. C C00392134
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1428.57

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2010
Transaction ID: 01202.C323088
Amount of Each Receipt this Period: 1428.57
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Target State Victory Fund
Mailing Address 228 S Washington St Ste 115
City: Alexandria State: VA Zip Code: 22314-
FEC ID number of contributing federal political committee. C C00487512
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 72940.28

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2010
Transaction ID: C322305
Amount of Each Receipt this Period: 14032.62
Transfers From Affil./Auth.

C.
Full Name (Last, First, Middle Initial)
Nancy Hiles
Mailing Address 2505 N. State Highway 360 Suite 800
City: Grand Prairie State: TX Zip Code: 75050-
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Homemaker
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 325.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2010
Transaction ID: C323062
Amount of Each Receipt this Period: 325.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 14032.62

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 65 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
Marcus Hiles
Mailing Address 2505 N. State Highway 360
Suite 800
City: Grand Prairie State: TX Zip Code: 75050-
FEC ID number of contributing federal political committee. C
Name of Employer: Western Rim Property Services
Occupation: Chairman & CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 10 / 28 / 2010
Transaction ID: C323061
Amount of Each Receipt this Period: 325.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Bluegrass Committee
Mailing Address 228 S. Washington Street
Suite 115
City: Alexandria State: VA Zip Code: 22314-
FEC ID number of contributing federal political committee. C C00235655
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 28 / 2010
Transaction ID: C323058
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

C.
Full Name (Last, First, Middle Initial)
Republican Majority Fund
Mailing Address P.O. Box 144
Suite 300
City: Alexandria State: VA Zip Code: 22313-
FEC ID number of contributing federal political committee. C C00296640
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 28 / 2010
Transaction ID: C323063
Amount of Each Receipt this Period: 5000.00
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 66 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial)
21st Century Majority Fund
Mailing Address 6065 Roswell Road
P.O. Box 2274
City: Atlanta State: GA Zip Code: 30328-
FEC ID number of contributing federal political committee. C C00361956
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3571.43
Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2010
Transaction ID: C323060
Amount of Each Receipt this Period: 3571.43
Transfer Memo
[MEMO ITEM]
MEMO: Targt.State Victory Fund

B.
Full Name (Last, First, Middle Initial)
Schock Victory Committee
Mailing Address 264 N Lumpkin St
City: Athens State: GA Zip Code: 30601-2832
FEC ID number of contributing federal political committee. C C00469395
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 15549.23
Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2010
Transaction ID: 01130.C321766
Amount of Each Receipt this Period: 15549.23
Transfers From Affil./Auth.

C.
Full Name (Last, First, Middle Initial)
Delores Blaudow
Mailing Address P.O. Box 510965
City: Key Colony Beach State: FL Zip Code: 33051-
FEC ID number of contributing federal political committee. C
Name of Employer: None
Occupation: Homemaker
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2010
Transaction ID: 01202.C323070
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

SUBTOTAL of Receipts This Page (optional) ..... ▶ 15549.23

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 67 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Rita Kress
Mailing Address: 16600 W. Brimfield Jubilee Rd.
City: Brimfield State: IL Zip Code: 61517-
FEC ID number of contributing federal political committee: C
Name of Employer: Kress Corp
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 01202.C323069
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

B.
Full Name (Last, First, Middle Initial): Vicki Petersen
Mailing Address: 830 W. Trailcreek Dr.
City: Peoria State: IL Zip Code: 61614-
FEC ID number of contributing federal political committee: C
Name of Employer: Petersen Healthcare
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 10419.C326609
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

C.
Full Name (Last, First, Middle Initial): Michael Dalton
Mailing Address: 8300 N. Allen Road
City: Peoria State: IL Zip Code: 61615-
FEC ID number of contributing federal political committee: C
Name of Employer: Maui Jim
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 10419.C326611
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 68 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mark Petersen
Mailing Address: 830 W. Trailcreek Dr.
City: Peoria State: IL Zip Code: 61614-
FEC ID number of contributing federal political committee: C
Name of Employer: Petersen Healthcare
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 01202.C323068
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

B.
Full Name (Last, First, Middle Initial): Rebecca Frye
Mailing Address: 112 Fawn Ct.
City: Washington State: IL Zip Code: 61571-
FEC ID number of contributing federal political committee: C
Name of Employer: Agri-Business Solutions
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 9800.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 01202.C323065
Amount of Each Receipt this Period: 9800.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

C.
Full Name (Last, First, Middle Initial): Diane Oberhelman
Mailing Address: 6005 N. Kickapoo-Edwards Rd.
City: Edwards State: IL Zip Code: 61528-
FEC ID number of contributing federal political committee: C
Name of Employer: Cullinan Properties, Ltd.
Occupation: Developer
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 10 / 18 / 2010
Transaction ID: 10419.C326608
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

SUBTOTAL of Receipts This Page (optional) ..... ▶ 0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 69 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Douglas Oberhelman
Mailing Address: 6000 N. Kickapoo Edwards Rd
City: Edwards State: IL Zip Code: 61528-
FEC ID number of contributing federal political committee: C
Name of Employer: Caterpillar, Inc.
Occupation: Group President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00

Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2010
Transaction ID: 01202.C323066
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

B.
Full Name (Last, First, Middle Initial): Schock Victory Committee
Mailing Address: 264 N Lumpkin St
City: Athens State: GA Zip Code: 30601-2832
FEC ID number of contributing federal political committee: C C00469395
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 18563.72

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2010
Transaction ID: 01130.C321765
Amount of Each Receipt this Period: 3014.49
Transfers From Affil./Auth.

C.
Full Name (Last, First, Middle Initial): Michael Stone
Mailing Address: 142 W Detweiller Dr
City: Peoria State: IL Zip Code: 61615-
FEC ID number of contributing federal political committee: C
Name of Employer: RU
Occupation: Insurance
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2400.00

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2010
Transaction ID: 01202.C323067
Amount of Each Receipt this Period: 2400.00
Transfer Memo
[MEMO ITEM]
MEMO: Schock Victory Committee

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3014.49

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 70 / 536

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Elizabeth Stone

Mailing Address 142 W. Detweiller Dr.

City: Peoria
State: IL
Zip Code: 61615-

FEC ID number of contributing federal political committee.
C

Name of Employer
WES Lending

Occupation
Mortgage

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2010

Transaction ID: 10419.C326612

Amount of Each Receipt this Period
2400.00

Transfer Memo

[MEMO ITEM]
MEMO: Schock Victory Committee

SUBTOTAL of Receipts This Page (optional) ..... ▶ **0.00**

TOTAL This Period (last page this line number only) ..... ▶ **256682.32**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 71 / 536

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Illinois Republican Party

Mailing Address LEVIN ACCOUNT
205 W. Randolph Street, #1245

City: Chicago
State: IL
Zip Code: 60606-

FEC ID number of contributing federal political committee.
C C00005926

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: C322933

Amount of Each Receipt this Period
5000.00

Other Receipt

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5000.00**

TOTAL This Period (last page this line number only) ..... ▶ **5000.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): American Express Establishment Services
Mailing Address: P.O. Box 53852
City: Phoenix State: AZ Zip Code: 85072-
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24371
Date of Disbursement: MM 10 / DD 29 / YYYY 2010
Amount of Each Disbursement this Period: 4.95
CREDIT CARD PROCESSING

B.
Full Name (Last, First, Middle Initial): Angelos Pizza
Mailing Address: 1003 Curtiss Street
City: Downers Grove State: IL Zip Code: 60515-
Purpose of Disbursement: Food & Beverages for Volunteers
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24520
Date of Disbursement: MM 11 / DD 10 / YYYY 2010
Amount of Each Disbursement this Period: 567.68
FOOD & BEVERAGES FOR VOLUNTEERS

C.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24426
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 33.50
MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **606.13**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24427
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 12.00

TRAVEL REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24429
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 519.08

REIMBURSEMENT: SEE BELOW

C.
Full Name (Last, First, Middle Initial): Costco
Mailing Address: 2746 N. Clyborn Avenue
City: Chicago State: IL Zip Code: 60614-
Purpose of Disbursement: MEMO: Food & Beverage Reimb.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 10304.E24841
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 380.38

[MEMO ITEM]
MEMO: MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **531.08**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Ginos East
Mailing Address: 2801 N. Lincoln Ave.
City: Chicago State: IL Zip Code: 60657-
Purpose of Disbursement: FOOD & BEVG. REIMBURSEMENT
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24842
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 45.44
[MEMO ITEM]
MEMO: FOOD & BEVG. REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Grand River
Mailing Address: 3032 N. Lincoln Ave.
City: Chicago State: IL Zip Code: 60657-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24843
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 93.26
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: 37 Signals Database Mgmt
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24428
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 49.00
37 SIGNALS DATABASE MGMT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **49.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24478
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 958.26
REIMBURSEMENT: SEE BELOW

B.
Full Name (Last, First, Middle Initial): Taco Fresco
Mailing Address: 218 South Clark
City: Chicago State: IL Zip Code: 60604-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 10315.E24845
Date of Disbursement: MM 10 / DD 23 / YYYY 2010
Amount of Each Disbursement this Period: 197.46
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): La Scarola
Mailing Address: 721 W. Grand Avenue
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 10315.E24846
Date of Disbursement: MM 10 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 113.50
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **958.26**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Bricks Pizza
Mailing Address: 1909 N. Lincoln Ave. #1
City: Chicago State: IL Zip Code: 60614-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24847
Date of Disbursement: 10 / 09 / 2010
Amount of Each Disbursement this Period: 43.25
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Sarpinos Pizza
Mailing Address: 627 W. Lake St.
City: Chicago State: IL Zip Code: 60661-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24848
Date of Disbursement: 10 / 05 / 2010
Amount of Each Disbursement this Period: 33.90
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Sarpinos Pizza
Mailing Address: 627 W. Lake St.
City: Chicago State: IL Zip Code: 60661-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24849
Date of Disbursement: 10 / 09 / 2010
Amount of Each Disbursement this Period: 60.76
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 255 East Grand Ave.
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24850
Date of Disbursement: 09 / 18 / 2010
Amount of Each Disbursement this Period: 69.55
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Costco
Mailing Address: 2746 N. Clyborn Avenue
City: Chicago State: IL Zip Code: 60614-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24851
Date of Disbursement: 08 / 24 / 2010
Amount of Each Disbursement this Period: 252.67
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Tesa
Mailing Address: 464 N. Halsted St.
City: Chicago State: IL Zip Code: 60622-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24852
Date of Disbursement: 10 / 08 / 2010
Amount of Each Disbursement this Period: 77.29
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mazas
Mailing Address: 2748 N. Lincoln Ave.
City: Chicago State: IL Zip Code: 60614-
Purpose of Disbursement: FOOD REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24853
Date of Disbursement: 10 / 06 / 2010
Amount of Each Disbursement this Period: 50.60
[MEMO ITEM]
MEMO: FOOD REIMB.

B.
Full Name (Last, First, Middle Initial): La Scarola
Mailing Address: 721 W. Grand Avenue
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24854
Date of Disbursement: 10 / 08 / 2010
Amount of Each Disbursement this Period: 59.28
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: 37 Signals Database Mgmt
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24477
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 49.00
37 SIGNALS DATABASE MGMT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **49.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Blue Sky Aero Inc.
Mailing Address: 9980 N. Rt. 47
City: Morris State: IL Zip Code: 60450-
Purpose of Disbursement: Transportation
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24376
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 757.60
TRANSPORTATION

B.
Full Name (Last, First, Middle Initial): Certegy Merchant Relations
Mailing Address: P.O. Box 30070 TA-02
City: Tampa State: FL Zip Code: 33630-
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24372
Date of Disbursement: 10 / 29 / 2010
Amount of Each Disbursement this Period: 114.37
CREDIT CARD PROCESSING

C.
Full Name (Last, First, Middle Initial): Certegy Merchant Relations
Mailing Address: P.O. Box 30070 TA-02
City: Tampa State: FL Zip Code: 33630-
Purpose of Disbursement: Credit Card Processing
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24393
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 70.97
CREDIT CARD PROCESSING

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **942.94**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Citizens for Bill Brady
Mailing Address: PO Box 5314
City: Bloomington State: IL Zip Code: 61702-5314
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24468
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 1200.00
RENT

B.
Full Name (Last, First, Middle Initial): Comcast Cable
Mailing Address: P.O. Box 3001
City: Southeastern State: PA Zip Code: 19398-
Purpose of Disbursement: Cable Television
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24284
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 1175.72
CABLE TELEVISION

C.
Full Name (Last, First, Middle Initial): Comcast Cable
Mailing Address: P.O. Box 3001
City: Southeastern State: PA Zip Code: 19398-
Purpose of Disbursement: Cable Television
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24574
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 588.15
CABLE TELEVISION

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2963.87

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Comcast Cable
Mailing Address: P.O. Box 3001
City: Southeastern State: PA Zip Code: 19398-
Purpose of Disbursement: Cable Television
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24573
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 211.07
CABLE TELEVISION

B.
Full Name (Last, First, Middle Initial): Comcast Cable
Mailing Address: P.O. Box 3001
City: Southeastern State: PA Zip Code: 19398-
Purpose of Disbursement: Comcast Cable
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24575
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 579.57
COMCAST CABLE

C.
Full Name (Last, First, Middle Initial): Commonwealth Edison
Mailing Address: P.O. Box 6111
City: Carol Stream State: IL Zip Code: 60197-
Purpose of Disbursement: Utilities
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24576
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 430.72
UTILITIES

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1221.36**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24213
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 692.00
MILEAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24214
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 1453.21
REIMBURSEMENT: SEE BELOW

C.
Full Name (Last, First, Middle Initial): Double Tree Hotel
Mailing Address: 1909 Spring Rd
City: Oak Brook State: IL Zip Code: 60523-3906
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24855
Date of Disbursement: MM 09 / DD 18 / YYYY 2010
Amount of Each Disbursement this Period: 500.00
[MEMO ITEM]
MEMO: HOTEL REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2145.21**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Holiday Inn
Mailing Address: 350 W. Mart Center Drive
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24856
Date of Disbursement: 09 / 22 / 2010
Amount of Each Disbursement this Period: 305.82
[MEMO ITEM]
MEMO: HOTEL REIMB.

B.
Full Name (Last, First, Middle Initial): Holiday Inn Express
Mailing Address: 640 N. Wabash Avenue
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24857
Date of Disbursement: 09 / 29 / 2010
Amount of Each Disbursement this Period: 394.67
[MEMO ITEM]
MEMO: HOTEL REIMB.

C.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24858
Date of Disbursement: 09 / 29 / 2010
Amount of Each Disbursement this Period: 20.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIM-B.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24859
Date of Disbursement: 10 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24860
Date of Disbursement: 10 / 07 / 2010
Amount of Each Disbursement this Period: 20.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Holiday Inn
Mailing Address: 350 W. Mart Center Drive
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24861
Date of Disbursement: 10 / 06 / 2010
Amount of Each Disbursement this Period: 192.72
[MEMO ITEM]
MEMO: HOTEL REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24293
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 607.00
MILEAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24295
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 100.00
TELEPHONE EXPENSE

C.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24294
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 915.49
REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1622.49**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Holiday Inn Express
Mailing Address: 640 N. Wabash Avenue
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24862
Date of Disbursement: MM 10 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 197.34
[MEMO ITEM]
MEMO: HOTEL REIMB.

B.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24863
Date of Disbursement: MM 10 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 31.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIM-B.

C.
Full Name (Last, First, Middle Initial): Ontario Garage
Mailing Address: 10 E. Ontario
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10315.E24864
Date of Disbursement: MM 10 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 34.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIM-B.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24865
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 20.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Holiday Inn
Mailing Address: 205 Remington Boulevard
City: Bolingbrook State: IL Zip Code: 60440-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24866
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 199.47
[MEMO ITEM]
MEMO: HOTEL REIMB.

C.
Full Name (Last, First, Middle Initial): Holiday Inn
Mailing Address: 350 W. Mart Center Drive
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: HOTEL REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24867
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 402.68
[MEMO ITEM]
MEMO: HOTEL REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24868
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 31.00
[MEMO ITEM]
MEMO: PARKING GARAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24382
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2195.80
REIMBURSEMENT: SEE BELOW

C.
Full Name (Last, First, Middle Initial): English Bar & Restaurant
Mailing Address: 444 N. LaSalle Dr.
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24869
Date of Disbursement: 09 / 30 / 2010
Amount of Each Disbursement this Period: 1773.54
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2195.80**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Illinois Republican Party
Mailing Address: Cole Taylor Federal Account, 205 W. Randolph
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: MILEAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24870
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 201.00
[MEMO ITEM]
MEMO: MILEAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Illinois Republican Party
Mailing Address: Cole Taylor Federal Account, 205 W. Randolph
City: Chicago State: IL Zip Code: 60606-
Purpose of Disbursement: MILEAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24871
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 201.00
[MEMO ITEM]
MEMO: MILEAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Ontario Garage
Mailing Address: 10 E. Ontario
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: PARKING GARAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10315.E24872
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 20.26
[MEMO ITEM]
MEMO: PARKING GARAGE REIM-B.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Cook County Republican Party
Mailing Address: 10548 Roberts Road
City: Palos Hills State: IL Zip Code: 60465-
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24470
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 1050.00
RENT

B.
Full Name (Last, First, Middle Initial): Cook County Republican Party
Mailing Address: 10548 Roberts Road
City: Palos Hills State: IL Zip Code: 60465-
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24469
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 1250.00
RENT

C.
Full Name (Last, First, Middle Initial): Cook County Republican Party
Mailing Address: 10548 Roberts Road
City: Palos Hills State: IL Zip Code: 60465-
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24515
Date of Disbursement: MM 11 / DD 10 / YYYY 2010
Amount of Each Disbursement this Period: 3500.00
RENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5800.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24432
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 432.00
FOOD & BEVERAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24431
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 24.00
MILEAGE REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24433
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 17.00
TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **473.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: WebsitesNetwk CablesAdaptersTape
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24434
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 256.24
WEBSITESNETWK CABLESADAPTERSTAPE

B.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24438
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 190.77
FOOD & BEVERAGE REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24437
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 83.45
TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **530.46**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24490
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 369.13
FOOD & BEVERAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Eric Di Silvestro
Mailing Address: 1510 N Bosworth Ave Apt 1
City: Chicago State: IL Zip Code: 60642-7612
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24543
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 261.68
FOOD & BEVERAGE REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Downers Grove Twp Rep. Organization
Mailing Address: 137 Iris Rd
City: Darien State: IL Zip Code: 60561-3966
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24467
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 600.00
RENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1230.81**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): EDonation 1 Account
Mailing Address: 118 N. Saint Asaph St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: Party Fundraising Internet
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01201.E24663
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 298.54
PARTY FUNDRAISING INTERNET

B.
Full Name (Last, First, Middle Initial): EDonation 1 Account
Mailing Address: 118 N. Saint Asaph St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: Party Fundraising Internet
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24659
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1751.80
PARTY FUNDRAISING INTERNET

C.
Full Name (Last, First, Middle Initial): EDonation 1 Account
Mailing Address: 118 N. Saint Asaph St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: Party Fundraising Internet
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01201.E24664
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 1132.70
PARTY FUNDRAISING INTERNET

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3183.04**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B
Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: 01130.E24485
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1093.66
REIMBURSEMENT: SEE BELOW

B.
Full Name (Last, First, Middle Initial): Pizanos Pizza
Mailing Address: 864 N. State Street
City: Chicago State: IL Zip Code: 60610-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: 10315.E24873
Date of Disbursement: 10 / 02 / 2010
Amount of Each Disbursement this Period: 40.91
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 255 East Grand Ave.
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: 10315.E24874
Date of Disbursement: 10 / 04 / 2010
Amount of Each Disbursement this Period: 43.66
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1093.66**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24875
Date of Disbursement: 10 / 13 / 2010
Amount of Each Disbursement this Period: 33.72
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24876
Date of Disbursement: 10 / 05 / 2010
Amount of Each Disbursement this Period: 20.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Northbrook Convn. Store
Mailing Address: 2766 Dundee Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24877
Date of Disbursement: 10 / 06 / 2010
Amount of Each Disbursement this Period: 50.21
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24878
Date of Disbursement: 10 / 09 / 2010
Amount of Each Disbursement this Period: 56.52
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24879
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 27.18
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Panda Express
Mailing Address: 300 E. Dundee Road.
City: Wheeling State: IL Zip Code: 60090-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24880
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 26.48
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24881
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 17.46
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1975 Cherry Lane
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24882
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 9.07
[MEMO ITEM]
MEMO: FOOD REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24883
Date of Disbursement: 10 / 16 / 2010
Amount of Each Disbursement this Period: 112.11
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24884
Date of Disbursement: 10 / 19 / 2010
Amount of Each Disbursement this Period: 40.04
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24885
Date of Disbursement: 10 / 20 / 2010
Amount of Each Disbursement this Period: 8.73
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24886
Date of Disbursement: 10 / 22 / 2010
Amount of Each Disbursement this Period: 122.22
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24887
Date of Disbursement: 10 / 23 / 2010
Amount of Each Disbursement this Period: 76.32
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24888
Date of Disbursement: 10 / 16 / 2010
Amount of Each Disbursement this Period: 27.18
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24889
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 23.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24890
Date of Disbursement: 10 / 19 / 2010
Amount of Each Disbursement this Period: 23.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24891
Date of Disbursement: 10 / 20 / 2010
Amount of Each Disbursement this Period: 31.18
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24892
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 23.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Buffalo Wild Wings
Mailing Address: 1018 Willow Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24893
Date of Disbursement: 10 / 17 / 2010
Amount of Each Disbursement this Period: 41.72
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Buffalo Wild Wings
Mailing Address: 1018 Willow Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24894
Date of Disbursement: 10 / 24 / 2010
Amount of Each Disbursement this Period: 95.35
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Office Depot
Mailing Address: 8315 West Golf Road
City: Niles State: IL Zip Code: 60714-
Purpose of Disbursement: OFFICE SUPPLIES REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10315.E24895
Date of Disbursement: 10 / 22 / 2010
Amount of Each Disbursement this Period: 71.13
[MEMO ITEM]
MEMO: OFFICE SUPPLIES REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24959
Date of Disbursement: 10 / 06 / 2010
Amount of Each Disbursement this Period: 20.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24960
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 50.32
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B
Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: Toilettrees and Whiteboard
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24486
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 41.81
TOILETTREES AND WHITEBOARD

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **41.81**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B
Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: ToiletreesCupsPlatesNapkins
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24538
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 171.30
TOILETREESCUPSPLATESNAPKINS

B.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B
Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24537
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1076.19
REIMBURSEMENT: SEE BELOW

C.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24896
Date of Disbursement: 09 / 01 / 2010
Amount of Each Disbursement this Period: 17.09
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1247.49**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24897
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 17.09
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24898
Date of Disbursement: 10 / 23 / 2010
Amount of Each Disbursement this Period: 37.72
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24899
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 38.72
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24900
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 31.18
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24901
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 46.26
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominos
Mailing Address: 1022 Waukegan Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24902
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 37.72
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Greek Feast
Mailing Address: 2784 Dundee Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24903
Date of Disbursement: 09 / 10 / 2010
Amount of Each Disbursement this Period: 21.26
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24904
Date of Disbursement: 10 / 24 / 2010
Amount of Each Disbursement this Period: 71.02
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24905
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 29.47
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24907
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 44.18
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24908
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 27.36
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24909
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 95.33
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24910
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 64.44
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1975 Cherry Lane
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: SUPPLIES: MARKERS
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24911
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 6.54
[MEMO ITEM]
MEMO: SUPPLIES: MARKERS

C.
Full Name (Last, First, Middle Initial): Jakes Pizza
Mailing Address: 2722 Dundee Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24912
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 59.98
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jakes Pizza
Mailing Address: 2722 Dundee Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24913
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 59.98
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Dunkin Donuts
Mailing Address: 499 Lake Cook Road
City: Deerfield State: IL Zip Code: 60015-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24914
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 19.28
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Sandwiches Subway
Mailing Address: 300 Skokie Blvd. #C
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24916
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 54.63
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Sandwiches Subway
Mailing Address: 300 Skokie Blvd. #C
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24917
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 65.55
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Buffalo Wild Wings
Mailing Address: 1018 Willow Road
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24918
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 111.71
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Dominicks
Mailing Address: 4125 Dundee Rd.
City: Northbrook State: IL Zip Code: 60062-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24962
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 119.68
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): FLS Connect, LLC
Mailing Address: 7300 Hudson Blvd N
City: Saint Paul State: MN Zip Code: 55128-7141
Purpose of Disbursement: Party Fundraising Telemarketing
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24269
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 5000.00
PARTY FUNDRAISING TELEMARKETING

B.
Full Name (Last, First, Middle Initial): FLS Connect, LLC
Mailing Address: 7300 Hudson Blvd N
City: Saint Paul State: MN Zip Code: 55128-7141
Purpose of Disbursement: Party Fundraising Telemarketing
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24517
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 4607.67
PARTY FUNDRAISING TELEMARKETING

C.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24442
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 961.29
REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10568.96**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Fulgenzis Pizza & Pasta
Mailing Address: 1168 E. Sangamon Avenue
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24919
Date of Disbursement: 08 / 26 / 2010
Amount of Each Disbursement this Period: 40.49
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Fulgenzis Pizza & Pasta
Mailing Address: 1168 E. Sangamon Avenue
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24920
Date of Disbursement: 09 / 09 / 2010
Amount of Each Disbursement this Period: 23.88
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Fulgenzis Pizza & Pasta
Mailing Address: 1168 E. Sangamon Avenue
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24921
Date of Disbursement: 10 / 04 / 2010
Amount of Each Disbursement this Period: 57.50
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mel-O-Cream
Mailing Address: 3010 South 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24922
Date of Disbursement: 08 / 28 / 2010
Amount of Each Disbursement this Period: 17.49
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Mel-O-Cream
Mailing Address: 3010 South 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24923
Date of Disbursement: 10 / 02 / 2010
Amount of Each Disbursement this Period: 21.11
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Sams Club
Mailing Address: 2300 White Oaks Dr.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24924
Date of Disbursement: 08 / 31 / 2010
Amount of Each Disbursement this Period: 185.86
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Sams Club
Mailing Address: 2300 White Oaks Dr.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24925
Date of Disbursement: 09 / 20 / 2010
Amount of Each Disbursement this Period: 117.02
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Sams Club
Mailing Address: 2300 White Oaks Dr.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVEREAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24927
Date of Disbursement: 09 / 28 / 2010
Amount of Each Disbursement this Period: 77.48
[MEMO ITEM]
MEMO: FOOD & BEVEREAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Turaskys Meats
Mailing Address: 1129 Taintor Road
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24928
Date of Disbursement: 09 / 10 / 2010
Amount of Each Disbursement this Period: 51.84
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1310 South 5th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24929
Date of Disbursement: 09 / 13 / 2010
Amount of Each Disbursement this Period: 18.86
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Saputos Italian Foods Inc.
Mailing Address: 801 E Monroe St.
City: Springfield State: IL Zip Code: 62701-1915
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24931
Date of Disbursement: 09 / 13 / 2010
Amount of Each Disbursement this Period: 42.10
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Saputos Italian Foods Inc.
Mailing Address: 801 E Monroe St.
City: Springfield State: IL Zip Code: 62701-1915
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24932
Date of Disbursement: 09 / 14 / 2010
Amount of Each Disbursement this Period: 51.85
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Saputos Italian Foods Inc.
Mailing Address: 801 E Monroe St.
City: Springfield State: IL Zip Code: 62701-1915
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24933
Date of Disbursement: 09 / 27 / 2010
Amount of Each Disbursement this Period: 42.10
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Saputos Italian Foods Inc.
Mailing Address: 801 E Monroe St.
City: Springfield State: IL Zip Code: 62701-1915
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24934
Date of Disbursement: 09 / 30 / 2010
Amount of Each Disbursement this Period: 42.10
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Taco Gingo
Mailing Address: 975 Clocktower Drive
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24935
Date of Disbursement: 09 / 22 / 2010
Amount of Each Disbursement this Period: 27.39
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Food Mart
Mailing Address: 600 North 9th Street
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24936
Date of Disbursement: 09 / 28 / 2010
Amount of Each Disbursement this Period: 40.00
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Shop-N-Save
Mailing Address: 1755 Wabash
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24937
Date of Disbursement: 10 / 02 / 2010
Amount of Each Disbursement this Period: 14.69
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Schnucks
Mailing Address: 2801 Chatham Rd.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24938
Date of Disbursement: 10 / 04 / 2010
Amount of Each Disbursement this Period: 89.53
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: Cable Cords and Postage
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24493
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 77.80
CABLE CORDS AND POSTAGE

B.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24494
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1129.43
REIMBURSEMENT: SEE BELOW

C.
Full Name (Last, First, Middle Initial): Jimmy Johns
Mailing Address: 3128 S. 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 10316.E24939
Date of Disbursement: 08 / 16 / 2010
Amount of Each Disbursement this Period: 48.32
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1207.23**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jimmy Johns
Mailing Address: 3128 S. 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24940
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 49.32
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Mel-O-Cream
Mailing Address: 3010 South 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24941
Date of Disbursement: 10 / 09 / 2010
Amount of Each Disbursement this Period: 21.32
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Mel-O-Cream
Mailing Address: 3010 South 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24942
Date of Disbursement: 10 / 16 / 2010
Amount of Each Disbursement this Period: 20.48
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mel-O-Cream
Mailing Address: 3010 South 6th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24943
Date of Disbursement: 10 / 23 / 2010
Amount of Each Disbursement this Period: 20.48
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Fulgenzis Pizza & Pasta
Mailing Address: 1168 E. Sangamon Avenue
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24944
Date of Disbursement: 10 / 07 / 2010
Amount of Each Disbursement this Period: 58.51
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1310 South 5th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24945
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 30.37
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1310 South 5th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24946
Date of Disbursement: MM 10 / DD 25 / YYYY 2010
Amount of Each Disbursement this Period: 34.05
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Walgreens
Mailing Address: 1310 South 5th St.
City: Springfield State: IL Zip Code: 62703-
Purpose of Disbursement: BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24947
Date of Disbursement: MM 10 / DD 22 / YYYY 2010
Amount of Each Disbursement this Period: 15.51
[MEMO ITEM]
MEMO: BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Head West Sub
Mailing Address: 530 E Capitol Avenue
City: Springfield State: IL Zip Code: 62701-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 10316.E24948
Date of Disbursement: MM 10 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 41.58
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Head West Sub
Mailing Address: 530 E Capitol Avenue
City: Springfield State: IL Zip Code: 62701-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24949
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 37.26
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Head West Sub
Mailing Address: 530 E Capitol Avenue
City: Springfield State: IL Zip Code: 62701-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24950
Date of Disbursement: 10 / 19 / 2010
Amount of Each Disbursement this Period: 55.35
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Taco Gringo
Mailing Address: 975 Clock Tower Drive
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24951
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 34.83
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Sams Club
Mailing Address: 2300 White Oaks Dr.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24952
Date of Disbursement: 10 / 12 / 2010
Amount of Each Disbursement this Period: 135.13
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Sams Club
Mailing Address: 2300 White Oaks Dr.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24953
Date of Disbursement: 10 / 22 / 2010
Amount of Each Disbursement this Period: 111.51
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Schnucks
Mailing Address: 2801 Chatham Rd.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24954
Date of Disbursement: 10 / 23 / 2010
Amount of Each Disbursement this Period: 28.19
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Schnucks
Mailing Address: 2801 Chatham Rd.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24955
Date of Disbursement: 10 / 19 / 2010
Amount of Each Disbursement this Period: 101.69
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Country Market
Mailing Address: 1610 Wabash
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24956
Date of Disbursement: 09 / 22 / 2010
Amount of Each Disbursement this Period: 44.50
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

C.
Full Name (Last, First, Middle Initial): Track Schack
Mailing Address: 233 East Laurel St.
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 10316.E24957
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 118.80
[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Turaskys Meats
Mailing Address: 1129 Taintor Road
City: Springfield State: IL Zip Code: 62702-
Purpose of Disbursement: FOOD & BEVERAGE REIMB.
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 10316.E24958
Date of Disbursement: MM 10 / DD 22 / YYYY 2010
Amount of Each Disbursement this Period: 122.23

[MEMO ITEM]
MEMO: FOOD & BEVERAGE REIMB.

B.
Full Name (Last, First, Middle Initial): Holiday Inn Select - Naperville
Mailing Address: 1801 Naper Blvd
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: Conference & Hotel Rooms
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24577
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 6600.38

CONFERENCE & HOTEL ROOMS

C.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24446
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 100.33

FOOD & BEVERAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6700.71**

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)

[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24548
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 126.00
MILEAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: Food & Beverages Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24549
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 407.71
FOOD & BEVERAGES REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Bryan Kinsey
Mailing Address: 304 E Harrison Ave
City: Wheaton State: IL Zip Code: 60187-4204
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24216
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 37.10
FOOD & BEVERAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **570.81**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Korman/ Lederer Management Co.
Mailing Address: 3100 Dundee Rd Ste 3100, Suite 3100
City: Northbrook State: IL Zip Code: 60062-2437
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24466
Date of Disbursement: 10 / 26 / 2010
Amount of Each Disbursement this Period: 950.00
RENT

B.
Full Name (Last, First, Middle Initial): Mool Law Firm LLC
Mailing Address: P.O. Box 8624
City: Springfield State: IL Zip Code: 62791-
Purpose of Disbursement: Legal Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24267
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 2500.00
LEGAL SERVICES

C.
Full Name (Last, First, Middle Initial): Neopost
Mailing Address: P.O. Box 73740
City: Chicago State: IL Zip Code: 60673-
Purpose of Disbursement: Generic Party Postage
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24416
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 177.72
GENERIC PARTY POSTAGE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3627.72**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Network Business Systems, Inc.
Mailing Address: 23834 East 1260th St.
City: Geneseo State: IL Zip Code: 61254-
Purpose of Disbursement: Internet/Network Support
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24522
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 475.00
INTERNET/NETWORK SUPPORT

B.
Full Name (Last, First, Middle Initial): Nicor Gas
Mailing Address: P.O. Box 0632
City: Aurora State: IL Zip Code: 60507-0632
Purpose of Disbursement: Utilities
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24572
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 213.93
UTILITIES

C.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24228
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **710.93**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24462
Date of Disbursement: MM 10 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 4.50
SERVICE FEE

B.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24275
Date of Disbursement: MM 10 / DD 21 / YYYY 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

C.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24280
Date of Disbursement: MM 10 / DD 22 / YYYY 2010
Amount of Each Disbursement this Period: 57.00
SERVICE FEE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **83.50**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24475
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

B.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24289
Date of Disbursement: MM 10 / DD 27 / YYYY 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

C.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24291
Date of Disbursement: MM 10 / DD 27 / YYYY 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **66.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24370
Date of Disbursement: MM 10 / DD 29 / YYYY 2010
Amount of Each Disbursement this Period: 22.00
SERVICE FEE

B.
Full Name (Last, First, Middle Initial): Palatine Township GOP
Mailing Address: 839 N. Quentin Road
City: Palatine State: IL Zip Code: 60067-
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24471
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 250.00
RENT

C.
Full Name (Last, First, Middle Initial): Peapod Delivery
Mailing Address: 9933 Woods Drive
City: Skokie State: IL Zip Code: 60077-
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24465
Date of Disbursement: MM 10 / DD 21 / YYYY 2010
Amount of Each Disbursement this Period: 168.56
OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **440.56**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): PKL Consulting
Mailing Address: 611 Thornwood Ln
City: Northfield State: IL Zip Code: 60093-1135
Purpose of Disbursement: Party Fundraising Consulting Fee
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24296
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2500.00
PARTY FUNDRAISING CONSULTING FEE

B.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24503
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 306.26
TRAVEL REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24502
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1086.50
MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3892.76**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: Phone Supplies & Setup
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24504
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 86.08
PHONE SUPPLIES & SETUP

B.
Full Name (Last, First, Middle Initial): Printing Ltd
Mailing Address: 101 E Main Cross St
City: Taylorville State: IL Zip Code: 62568-2225
Purpose of Disbursement: Party Printing NonCandidate
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24464
Date of Disbursement: MM 10 / DD 18 / YYYY 2010
Amount of Each Disbursement this Period: 140.00
PARTY PRINTING NONCANDIDATE

C.
Full Name (Last, First, Middle Initial): Printing Ltd
Mailing Address: 101 E Main Cross St
City: Taylorville State: IL Zip Code: 62568-2225
Purpose of Disbursement: Party Printing NonCandidate
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24521
Date of Disbursement: MM 11 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 719.49
PARTY PRINTING NONCANDIDATE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **945.57**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Volunteers for Shimkus
Mailing Address: PO Box 661
City: Springfield State: IL Zip Code: 62705-0661
Purpose of Disbursement: Airfare - American Airlines
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: C322934IK
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 2223.00
IN KIND: AIRFARE - AMERICAN AIRLINES

B.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Copy/Print Supplies Power Strips
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24219
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 155.05
COPY/PRINT SUPPLIES POWER STRIPS

C.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24218
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 167.93
FOOD & BEVERAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2545.98**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24220
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 50.00
TELEPHONE EXPENSE

B.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24301
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 222.45
FOOD & BEVERAGE REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24300
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 68.00
MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **340.45**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24386
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 83.10
TRAVEL REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): James Sprakties
Mailing Address: 12228 Black Road
City: Morrison State: IL Zip Code: 61270-
Purpose of Disbursement: Cable and Extension Cords
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24455
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 125.74
CABLE AND EXTENSION CORDS

C.
Full Name (Last, First, Middle Initial): SBDM
Mailing Address: P.O. Box 706
City: Tallahassee State: FL Zip Code: 32302-
Purpose of Disbursement: Party Fundraising Mail
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24310
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 5000.00
PARTY FUNDRAISING MAIL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5208.84**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Postal United States
Mailing Address: Station E, Lock Box Section
City: Chicago State: IL Zip Code: 60664-9998
Purpose of Disbursement: Parcel Delivery
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24243
Date of Disbursement: 10 / 20 / 2010
Amount of Each Disbursement this Period: 700.00
PARCEL DELIVERY

B.
Full Name (Last, First, Middle Initial): Postal United States
Mailing Address: Station E, Lock Box Section
City: Chicago State: IL Zip Code: 60664-9998
Purpose of Disbursement: Parcel Delivery
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24244
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 2500.00
PARCEL DELIVERY

C.
Full Name (Last, First, Middle Initial): United States Postal Service
Mailing Address: 411 E Monroe
City: Springfield State: IL Zip Code: 62701-
Purpose of Disbursement: Party Fundraising Mail
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24282
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 11455.00
PARTY FUNDRAISING MAIL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **14655.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): WCRCC
Mailing Address: P.O. Box 1686
City: Marion State: IL Zip Code: 62959-
Purpose of Disbursement: Rent
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24472
Date of Disbursement: MM 10 / DD 26 / YYYY 2010
Amount of Each Disbursement this Period: 250.00
RENT

B.
Full Name (Last, First, Middle Initial): Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24303
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 50.00
TELEPHONE EXPENSE

C.
Full Name (Last, First, Middle Initial): Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: 01130.E24388
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 49.49
TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **349.49**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24224
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 10.00
TRAVEL REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: Websites
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24223
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 101.36
WEBSITES

C.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: Telephone Expense
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: 01130.E24306
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 139.95
TELEPHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **251.31**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: Websites
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24305
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 61.61
WEBSITES

B.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: Websites Parking Food & Bevg.Reimb.
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24390
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 193.83
WEBSITES PARKING FOOD & BEVG.REIMB.

C.
Full Name (Last, First, Middle Initial): West Bend Mutual Insurance
Mailing Address: 188 Industrial Dr., Ste. 430
City: Elmhurst State: IL Zip Code: 60126-
Purpose of Disbursement: Insurance
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: 01130.E24463
Date of Disbursement: MM 10 / DD 18 / YYYY 2010
Amount of Each Disbursement this Period: 414.00
INSURANCE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **669.44**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Mike Zolnierowicz

Mailing Address 3648 Venard Rd

City: Downers Grove
State: IL
Zip Code: 60515-1349

Purpose of Disbursement
Telephone Expenses

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 01130.E24561

Date of Disbursement
MM 11 / DD 15 / YYYY 2010

Amount of Each Disbursement this Period
840.96

TELEPHONE EXPENSES

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**840.96**
TOTAL This Period (last page this line number only) ..... ▶	**80561.63**

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)

☐ 21b	☒ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
National Republican Senatorial Comm.

Mailing Address 425 - 2nd St., N.E.

City: Washington
State: DC
Zip Code: 20002-4914

Purpose of Disbursement
Transfer

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 01130.E24283

Date of Disbursement
MM 10 / DD 26 / YYYY 2010

Amount of Each Disbursement this Period
35000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **35000.00**

TOTAL This Period (last page this line number only) ..... ▶ **35000.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Pollak For Congress

Mailing Address P.O. Box 5027

City Evanston | State IL | Zip Code 60204-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JOEL BARRY POLLAK

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 09

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 01130.E24368

Date of Disbursement
M M 10 / D D 29 / Y Y Y Y 2010

Amount of Each Disbursement this Period
800.00

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **800.00**

TOTAL This Period (last page this line number only) ..... ▶ **800.00**

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Champaign County for Bill Brady PAC

Mailing Address 602 East Green Street
Suite 2A1

City Champaign State IL Zip Code 61820-

Purpose of Disbursement
TRANSFER

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 01130.E24461

Date of Disbursement
MM 10 / DD 15 / YYYY 2010

Amount of Each Disbursement this Period
5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

TOTAL This Period (last page this line number only) ..... ▶ **5000.00**

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☒ 28c	☐ 29	☐ 30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address PO Box 661

City Springfield | State IL | Zip Code 62705-0661

Purpose of Disbursement
Refund of Contribution

Candidate Name
JOHN M SHIMKUS

Category/Type: 010

Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 19

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 01130.E24516

Date of Disbursement
MM 11 / DD 10 / YYYY 2010

Amount of Each Disbursement this Period
25000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**25000.00**
TOTAL This Period (last page this line number only) ..... ▶	**25000.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): James Adinamis
Mailing Address: 555 W. Cornelia
City: Chicago State: IL Zip Code: 60657-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24358
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1800.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Adlexx Corporation
Mailing Address: PO Box 9594
City: Springfield State: IL Zip Code: 62791-9594
Purpose of Disbursement: FEA Volunteer Mail-Dold
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24288
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 23250.00
FEA VOLUNTEER MAIL-DOLD

C.
Full Name (Last, First, Middle Initial): Allstar Computer Mailing Services
Mailing Address: 980 W. Hawthorne Lane
City: West Chicago State: IL Zip Code: 60185-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24242
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 2017.40
FEA VOLUNTEER MAIL-HULTGR-EN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **27067.40**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Allstar Computer Mailing Services
Mailing Address: 980 W. Hawthorne Lane
City: West Chicago State: IL Zip Code: 60185-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24281
Date of Disbursement: MM 10 / DD 25 / YYYY 2010
Amount of Each Disbursement this Period: 3755.12
FEA VOLUNTEER MAIL-HULTGREN

B.
Full Name (Last, First, Middle Initial): Allstar Computer Mailing Services
Mailing Address: 980 W. Hawthorne Lane
City: West Chicago State: IL Zip Code: 60185-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24308
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1877.56
FEA VOLUNTEER MAIL-HULTGREN

C.
Full Name (Last, First, Middle Initial): Sarah Altmeyer
Mailing Address: 121 C Street, SE
City: Washington State: DC Zip Code: 20003-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24527
Date of Disbursement: MM 11 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 333.00
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5965.68**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Flavio Amaya
Mailing Address: 1602 Hobart St. NW
City: Washington State: DC Zip Code: 20009-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24424
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1666.66
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Flavio Amaya
Mailing Address: 1602 Hobart St. NW
City: Washington State: DC Zip Code: 20009-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24487
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1666.66
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Flavio Amaya
Mailing Address: 1602 Hobart St. NW
City: Washington State: DC Zip Code: 20009-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24539
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1666.66
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4999.98**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): John Arrington
Mailing Address: 31 E. 155th St.
City: Harvey State: IL Zip Code: 60426-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24317
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Joy Arrington
Mailing Address: 31 E. 155th St.
City: Harvey State: IL Zip Code: 60426-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24315
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Katie Bachman
Mailing Address: 1028 N. Honore Street
City: Chicago State: IL Zip Code: 60622-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24277
Date of Disbursement: MM 10 / DD 22 / YYYY 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3750.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Vernon Bennett
Mailing Address: 7647 S. Aberdeen
City: Chicago State: IL Zip Code: 60620-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24324
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Bob Black
Mailing Address: 119 S. School St.
City: Mount Prospect State: IL Zip Code: 60056-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24340
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24425
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5500.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24476
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Jonathan Blessing
Mailing Address: 1518 N Sedgwick St Unit B
Unit B
City: Chicago State: IL Zip Code: 60610-1223
Purpose of Disbursement: FEA Cnslting: Polit.Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24530
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 8500.00
FEA CNSLTING: POLIT.GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Lynne Boehringer
Mailing Address: 1430 N. Astor
#8B
City: Chicago State: IL Zip Code: 60610-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24355
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 300.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11300.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Virginia Bronecke
Mailing Address: 715 Clinton Pl
City: River Forest State: IL Zip Code: 60305-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24334
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Marlena Brooks
Mailing Address: 8802 S. Emerald Ave.
City: Chicago State: IL Zip Code: 60620-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24326
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Jonathan Callaway
Mailing Address: 504 N Beach Ave
City: La Grange Park State: IL Zip Code: 60526-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24435
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4250.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jonathan Callaway
Mailing Address: 504 N Beach Ave
City: La Grange Park State: IL Zip Code: 60526-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24479
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1350.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Jonathan Callaway
Mailing Address: 504 N Beach Ave
City: La Grange Park State: IL Zip Code: 60526-
Purpose of Disbursement: FEA Cnslting: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24531
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLIT. GRAS-SROOTS

C.
Full Name (Last, First, Middle Initial): Ross Cameron
Mailing Address: 300 Massachusetts Ave NW Apt. 622
City: Washington State: DC Zip Code: 20001-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24529
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 502.16
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3102.16**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Capital Data Technologies LLC
Mailing Address: 3109 Cascade Drive
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24456
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Capital Data Technologies LLC
Mailing Address: 3109 Cascade Drive
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24483
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Capital Data Technologies LLC
Mailing Address: 3109 Cascade Drive
City: Springfield State: IL Zip Code: 62704-
Purpose of Disbursement: FEA Cnslting: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24535
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING: POLIT. GRAS-SROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5500.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Kayleen Carlson
Mailing Address: 26304 N Middleton Pkwy
City: Mundelein State: IL Zip Code: 60060-9126
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24436
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Kayleen Carlson
Mailing Address: 26304 N Middleton Pkwy
City: Mundelein State: IL Zip Code: 60060-9126
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24480
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Kayleen Carlson
Mailing Address: 26304 N Middleton Pkwy
City: Mundelein State: IL Zip Code: 60060-9126
Purpose of Disbursement: FEA Cnslting: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24532
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLIT. GRAS-SROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2750.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Anthony Catalano
Mailing Address: 455 Atlantic Avenue
City: Elk Grove Village State: IL Zip Code: 60007-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24331
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Marie Catalano
Mailing Address: 387 Lambert
City: Schaumburg State: IL Zip Code: 60193-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24329
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Peter Catalano
Mailing Address: 387 Lambert
City: Schaumburg State: IL Zip Code: 60193-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24327
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Charles Cheesman
Mailing Address: 6929 157th P1.
City: Tinley Park State: IL Zip Code: 60477-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24359
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1200.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Robert Colby
Mailing Address: 16207 Eagle Ridge Dr.
City: Tinley Park State: IL Zip Code: 60477-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24319
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24212
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 3360.04
FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5960.04**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24292
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 3360.05
FEA PAYROLL

B.
Full Name (Last, First, Middle Initial): Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24381
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 3360.04
FEA PAYROLL

C.
Full Name (Last, First, Middle Initial): Mary Daniels
Mailing Address: 18627 Oak Wood Ave.
City: Country Club Hills State: IL Zip Code: 60478-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24439
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8220.09**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mary Daniels
Mailing Address: 18627 Oak Wood Ave.
City: Country Club Hills State: IL Zip Code: 60478-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24481
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Mary Daniels
Mailing Address: 18627 Oak Wood Ave.
City: Country Club Hills State: IL Zip Code: 60478-
Purpose of Disbursement: FEA Cnslting: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24533
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLIT. GRAS-SROOTS

C.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24430
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1750.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4750.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24488
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1750.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): DC Consulting
Mailing Address: 25 W 306 Highview Drive
City: Naperville State: IL Zip Code: 60563-
Purpose of Disbursement: FEA Cnsltng.Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24540
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2250.00
FEA CNSLTNG.POLIT. GRASSR-OOTS

C.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24578
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5250.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01019.E24193
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 0.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24489
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1350.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): T. Braxton Denton
Mailing Address: 2029 Carl Sandburg Ln. Apt 1
City: Springfield State: IL Zip Code: 62703-5491
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24541
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2600.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Eric Di Silvestro
Mailing Address: 1510 N Bosworth Ave Apt 1
City: Chicago State: IL Zip Code: 60642-7612
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24440
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Eric Di Silvestro
Mailing Address: 1510 N Bosworth Ave Apt 1
City: Chicago State: IL Zip Code: 60642-7612
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24491
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1550.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Eric Di Silvestro
Mailing Address: 1510 N Bosworth Ave Apt 1
City: Chicago State: IL Zip Code: 60642-7612
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24542
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2250.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5050.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Nancy Dibelka
Mailing Address: 205 W. Miner St.
City: Arlington Heights State: IL Zip Code: 60005-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24339
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): John Dusik
Mailing Address: 320 23rd Street S. #1403
City: Arlington State: VA Zip Code: 22202-
Purpose of Disbursement: FEA Communications Cnslt
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24518
Date of Disbursement: MM 11 / DD 10 / YYYY 2010
Amount of Each Disbursement this Period: 2500.00
FEA COMMUNICATIONS CNSLT

C.
Full Name (Last, First, Middle Initial): East Meridian Strategies LLC
Mailing Address: 219 East Taylor Run Pkwy
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24239
Date of Disbursement: MM 10 / DD 18 / YYYY 2010
Amount of Each Disbursement this Period: 7900.50
FEA VOLUNTEER MAIL-HULTGR-EN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11800.50**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): East Meridian Strategies LLC
Mailing Address: 219 East Taylor Run Pkwy
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24240
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 8696.37
FEA VOLUNTEER MAIL-HULTGREN

B.
Full Name (Last, First, Middle Initial): East Meridian Strategies LLC
Mailing Address: 219 East Taylor Run Pkwy
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24287
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 7262.39
FEA VOLUNTEER MAIL-HULTGREN

C.
Full Name (Last, First, Middle Initial): East Meridian Strategies LLC
Mailing Address: 219 East Taylor Run Pkwy
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24286
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 6560.50
FEA VOLUNTEER MAIL-HULTGREN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **22519.26**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): East Meridian Strategies LLC
Mailing Address: 219 East Taylor Run Pkwy
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24311
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 7867.00
FEA VOLUNTEER MAIL-HULTGR-EN

B.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24422
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1750.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24484
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2050.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11667.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Anthony Esposito
Mailing Address: 1620 Hintz Ln Apt 2B
Apt 2B
City: Wheeling State: IL Zip Code: 60090-5266
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24536
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 4250.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): Jeanne Farha
Mailing Address: 2043 Vermont
City: Quincy State: IL Zip Code: 62301-
Purpose of Disbursement: FEA Communications Cnslt.
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24512
Date of Disbursement: MM 11 / DD 01 / YYYY 2010
Amount of Each Disbursement this Period: 500.00
FEA COMMUNICATIONS CNSLT.

C.
Full Name (Last, First, Middle Initial): Karla Farnsworth
Mailing Address: 7701 Lafayette Forest Drive #22
City: Annandale State: VA Zip Code: 22003-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24523
Date of Disbursement: MM 11 / DD 11 / YYYY 2010
Amount of Each Disbursement this Period: 338.80
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5088.80**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Faulkner Strategies
Mailing Address: 12801 Sandy Court
City: Granger State: IN Zip Code: 46530-
Purpose of Disbursement: FEA Volunteer Mail-Kinzinger
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24369
Date of Disbursement: 10 / 29 / 2010
Amount of Each Disbursement this Period: 23825.67
FEA VOLUNTEER MAIL-KINZINGER

B.
Full Name (Last, First, Middle Initial): Forms Design Plus
Mailing Address: P.O. Box 9756
City: Peoria State: IL Zip Code: 61612-
Purpose of Disbursement: FEA Volunteer Mail-Schilling
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24373
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 33416.13
FEA VOLUNTEER MAIL-SCHILLING

C.
Full Name (Last, First, Middle Initial): Kurt Fujio
Mailing Address: 1810 W. Touhy
City: Chicago State: IL Zip Code: 60626-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24316
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **58741.80**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Wanda Gates
Mailing Address: 1110 Hull Terrace, Apt. 2
City: Evanston State: IL Zip Code: 60202-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24353
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Robert Grassel
Mailing Address: 300 N. State St., Apt. 5205
City: Chicago State: IL Zip Code: 60654-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24330
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24441
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24492
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1600.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Andrew Griswold
Mailing Address: 536 W Fayette Ave
City: Springfield State: IL Zip Code: 62704-2735
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24544
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): The Guardian
Mailing Address: P.O. Box 8012
City: Appleton State: WI Zip Code: 54913-8012
Purpose of Disbursement: FEA Health Insurance
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24276
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 12374.16
FEA HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **16474.16**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Eleana Hernandez
Mailing Address: 3650 South Wood Street
City: Chicago State: IL Zip Code: 60609-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24320
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Andria Hoffman
Mailing Address: 5688 Rosos Pkwy
City: Long Grove State: IL Zip Code: 60047-5063
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24443
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Andria Hoffman
Mailing Address: 5688 Rosos Pkwy
City: Long Grove State: IL Zip Code: 60047-5063
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24495
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6400.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Andria Hoffman
Mailing Address: 5688 Rosos Pkwy
City: Long Grove State: IL Zip Code: 60047-5063
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24545
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 4500.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): Willie Howard
Mailing Address: 7456 N. Rockwell St.
City: Chicago State: IL Zip Code: 60645-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24352
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTNG. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address: Department of Treasury
City: Cincinnati State: OH Zip Code: 45999-0005
Purpose of Disbursement: FEA Payroll Taxes
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24225
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 2586.68
FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8586.68**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address: Department of Treasury
City: Cincinnati State: OH Zip Code: 45999-0005
Purpose of Disbursement: FEA Payroll Taxes
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24362
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2586.62
FEA PAYROLL TAXES

B.
Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address: Department of Treasury
City: Cincinnati State: OH Zip Code: 45999-0005
Purpose of Disbursement: FEA Payroll Taxes
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24392
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 2586.68
FEA PAYROLL TAXES

C.
Full Name (Last, First, Middle Initial): Jamestown Associates
Mailing Address: 5 Mapleton Road Suite 300
City: Princeton State: NJ Zip Code: 08540-
Purpose of Disbursement: FEA Volunteer Mail-Dold
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24375
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 1872.50
FEA VOLUNTEER MAIL-DOLD

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7045.80**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Robert V. Johnson II
Mailing Address: 1733 Sequoia Trl
City: Glenview State: IL Zip Code: 60025-2022
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24444
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 1208.35
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Robert V. Johnson II
Mailing Address: 1733 Sequoia Trl
City: Glenview State: IL Zip Code: 60025-2022
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24496
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1208.35
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Robert V. Johnson II
Mailing Address: 1733 Sequoia Trl
City: Glenview State: IL Zip Code: 60025-2022
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24546
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 1708.35
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4125.05**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Greta Joynes
Mailing Address: 3745 Gunston Rd.
City: Alexandria State: VA Zip Code: 22302-
Purpose of Disbursement: FEA Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24562
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 780.44
FEA FOOD & BEVERAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Greta Joynes
Mailing Address: 3745 Gunston Rd.
City: Alexandria State: VA Zip Code: 22302-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24563
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 1942.62
FEA TRAVEL REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): K.K. Stevens Publishing Company
Mailing Address: 100 N. Pearl St. P.O. Box 590
City: Astoria State: IL Zip Code: 61501-0590
Purpose of Disbursement: FEA Volunteer Mail-Schilling
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24285
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 13900.00
FEA VOLUNTEER MAIL-SCHILLING

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **16623.06**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): John Kalmbach
Mailing Address: 746 W. Bittersweet Place, Apt. 1W
City: Chicago State: IL Zip Code: 60613-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24337
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Robert Kandelman
Mailing Address: 3108 W. Jerome St.
City: Chicago State: IL Zip Code: 60645-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24354
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Merle Kaplan
Mailing Address: 345 W. Fullerton Pkwy #606
City: Chicago State: IL Zip Code: 60614-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24347
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24445
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24497
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1800.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Jerry King
Mailing Address: 9 Hickory St
City: Harrisburg State: IL Zip Code: 62946-3414
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24547
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 3000.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6300.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Bryan Kinsey
Mailing Address: 304 E Harrison Ave
City: Wheaton State: IL Zip Code: 60187-4204
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24215
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA PAYROLL

B.
Full Name (Last, First, Middle Initial): Bryan Kinsey
Mailing Address: 304 E Harrison Ave
City: Wheaton State: IL Zip Code: 60187-4204
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24298
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA PAYROLL

C.
Full Name (Last, First, Middle Initial): Bryan Kinsey
Mailing Address: 304 E Harrison Ave
City: Wheaton State: IL Zip Code: 60187-4204
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24384
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Anne Kirkpatrick
Mailing Address: 222 E. Chestnut St. Unit 8B
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24332
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Kyle Kizzier
Mailing Address: 1422 East Capitol St., NE
City: Washington State: DC Zip Code: 20003-
Purpose of Disbursement: FEA Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24526
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 645.66
FEA FOOD & BEVERAGE REIMB-URSEMENT

C.
Full Name (Last, First, Middle Initial): Larkin Brody & Associates
Mailing Address: 5517 MacArthur Blvd
City: Washington State: DC Zip Code: 20016-
Purpose of Disbursement: FEA Volunteer Mail-Schilling
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24227
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 92827.00
FEA VOLUNTEER MAIL-SCHILL-ING

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **94972.66**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jim Leahy
Mailing Address: 1210 Halfday Rd.
City: Bannockburn State: IL Zip Code: 60015-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24421
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 2500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Emily Lindsay
Mailing Address: 1420 North Lakeshore Drive
City: Chicago State: IL Zip Code: 60610-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24348
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Margaret Lindsay
Mailing Address: 1420 N. Lake Shore Drive
City: Chicago State: IL Zip Code: 60610-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24346
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1800.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5700.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): David Marszalik
Mailing Address: 9541 S. 89th Ave.
City: Palos Hills State: IL Zip Code: 60465-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24323
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Joshua Marszalik
Mailing Address: 5556 S. Keeler
City: Chicago State: IL Zip Code: 60629-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24322
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Timothy Marszalik
Mailing Address: 9541 S. 89th Ave.
City: Palos Hills State: IL Zip Code: 60465-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24328
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4400.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): John McGuire
Mailing Address: 4145 N Springfield Ave
City: Chicago State: IL Zip Code: 60618-1811
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24338
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Frank Medina
Mailing Address: 3650 South Wood Street
City: Chicago State: IL Zip Code: 60609-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24321
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Tonia Members
Mailing Address: 7736 S. May St.
City: Chicago State: IL Zip Code: 60620-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24325
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jackie Menconi
Mailing Address: 908 N Lincoln Ave
City: Park Ridge State: IL Zip Code: 60068-2023
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24343
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Cheryl Meyer
Mailing Address: 5406 Crossview Lane
City: Lake In The Hills State: IL Zip Code: 60156-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24448
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 250.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Cheryl Meyer
Mailing Address: 5406 Crossview Lane
City: Lake In The Hills State: IL Zip Code: 60156-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24499
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 250.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Cheryl Meyer
Mailing Address: 5406 Crossview Lane
City: Lake In The Hills State: IL Zip Code: 60156-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24551
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 250.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): Devin Meyer
Mailing Address: 1 W Superior St Apt 3011 # 3011
City: Chicago State: IL Zip Code: 60654-8841
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24447
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1292.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Devin Meyer
Mailing Address: 1 W Superior St Apt 3011 # 3011
City: Chicago State: IL Zip Code: 60654-8841
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24498
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1292.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2834.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Devin Meyer
Mailing Address: 1 W Superior St Apt 3011 # 3011
City: Chicago State: IL Zip Code: 60654-8841
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24550
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1292.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): Matthew Meyers
Mailing Address: 5441 N. Sawyer
City: Chicago State: IL Zip Code: 60625-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24335
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTNG. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Luke Neuser
Mailing Address: 4333 S. 24th St.
City: Quincy State: IL Zip Code: 62305-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24449
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTNG: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3542.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Luke Neuser
Mailing Address: 4333 S. 24th St.
City: Quincy State: IL Zip Code: 62305-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24500
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Luke Neuser
Mailing Address: 4333 S. 24th St.
City: Quincy State: IL Zip Code: 62305-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24552
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Karen Parr
Mailing Address: 141 N. Cedar Street
City: Palatine State: IL Zip Code: 60067-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24345
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Nancy Perlman
Mailing Address: 3847 N Whipple St
City: Chicago State: IL Zip Code: 60618-3521
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24351
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Adam Peterman
Mailing Address: 440 12th Street, NE #1
City: Washington State: DC Zip Code: 20002-
Purpose of Disbursement: FEA Meal & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24525
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 1731.48
FEA MEAL & BEVERAGE REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Adam Peterman
Mailing Address: 440 12th Street, NE #1
City: Washington State: DC Zip Code: 20002-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24524
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 2037.95
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5169.43**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Diane Peterson
Mailing Address: 9243 Latrobe
City: Skokie State: IL Zip Code: 60077-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24341
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 700.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Don Peterson
Mailing Address: 9243 Latrobe
City: Skokie State: IL Zip Code: 60077-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24342
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 700.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24450
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 2750.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4150.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24501
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 2750.00
FEA CNSLTNG: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Randy Pollard
Mailing Address: 2517 Mabry Ln
City: Vandalia State: IL Zip Code: 62471-3710
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24553
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 7750.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Andrew Proctor
Mailing Address: 1203 Wesley Avenue #109
City: Savoy State: IL Zip Code: 61874-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24451
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTNG: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **12000.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Andrew Proctor
Mailing Address: 1203 Wesley Avenue #109
City: Savoy State: IL Zip Code: 61874-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24505
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1600.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Andrew Proctor
Mailing Address: 1203 Wesley Avenue #109
City: Savoy State: IL Zip Code: 61874-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24554
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 3000.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Michael Quinlan
Mailing Address: 2269 W. 109th St.
City: Chicago State: IL Zip Code: 60643-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24318
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6100.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Michael Rasmussen
Mailing Address: 319 Bonnie Brae Lane
City: Eureka State: IL Zip Code: 61530-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24452
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Michael Rasmussen
Mailing Address: 319 Bonnie Brae Lane
City: Eureka State: IL Zip Code: 61530-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24506
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Michael Rasmussen
Mailing Address: 319 Bonnie Brae Lane
City: Eureka State: IL Zip Code: 61530-
Purpose of Disbursement: FEA Cnsltng: Polt. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24555
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTNG: POLT. GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2750.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Matthew Rentschler
Mailing Address: 903 Newcastle #6
City: Champaign State: IL Zip Code: 61822-
Purpose of Disbursement: FEA Communications Cnslt.
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24519
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 3000.00
FEA COMMUNICATIONS CNSLT.

B.
Full Name (Last, First, Middle Initial): Craig Roberts
Mailing Address: 916 G Street NW #505
City: Washington State: DC Zip Code: 20004-
Purpose of Disbursement: FEA Food & Beverages Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24570
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 873.37
FEA FOOD & BEVERAGES REIMBURSEMENT

C.
Full Name (Last, First, Middle Initial): Craig Roberts
Mailing Address: 916 G Street NW #505
City: Washington State: DC Zip Code: 20004-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24571
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 638.35
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4511.72**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Donn Salvosa
Mailing Address: 9911 Oak Branch Drive
City: Vienna State: VA Zip Code: 22181-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24513
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 213.40
FEA TRAVEL REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Christopher Sarley
Mailing Address: 115 C Street, SE
City: Washington State: DC Zip Code: 20003-
Purpose of Disbursement: FEA Supplies: Paper & Labels
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24566
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 86.54
FEA SUPPLIES: PAPER & LABELS

C.
Full Name (Last, First, Middle Initial): Christopher Sarley
Mailing Address: 115 C Street, SE
City: Washington State: DC Zip Code: 20003-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24565
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 2120.59
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2420.53**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Christopher Sarley
Mailing Address: 115 C Street, SE
City: Washington State: DC Zip Code: 20003-
Purpose of Disbursement: FEA Food & Beverage Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24564
Date of Disbursement: MM 11 / DD 12 / YYYY 2010
Amount of Each Disbursement this Period: 166.93
FEA FOOD & BEVERAGE REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Peter Schellenbach
Mailing Address: 634 Drexel
City: Glencoe State: IL Zip Code: 60022-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24357
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1700.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24217
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 1375.00
FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3241.93**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24299
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1475.00
FEA PAYROLL

B.
Full Name (Last, First, Middle Initial): Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24385
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1375.00
FEA PAYROLL

C.
Full Name (Last, First, Middle Initial): Smartech Corp.
Mailing Address: PO Box 11181
City: Chattanooga State: TN Zip Code: 37401-2181
Purpose of Disbursement: FEA: Generic Party GOTV VOIP Phones
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24231
Date of Disbursement: 10 / 15 / 2010
Amount of Each Disbursement this Period: 269.30
FEA: GENERIC PARTY GOTV VOIP PHONES

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3119.30**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Smartech Corp.
Mailing Address: PO Box 11181
City: Chattanooga State: TN Zip Code: 37401-2181
Purpose of Disbursement: FEA: Generic Party GOTV VOIP Phones
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24253
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 2531.36
FEA: GENERIC PARTY GOTV VOIP PHONES

B.
Full Name (Last, First, Middle Initial): Smartech Corp.
Mailing Address: PO Box 11181
City: Chattanooga State: TN Zip Code: 37401-2181
Purpose of Disbursement: FEA: Generic Party GOTV VOIP Phones
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24252
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 952.93
FEA: GENERIC PARTY GOTV VOIP PHONES

C.
Full Name (Last, First, Middle Initial): Smartech Corp.
Mailing Address: PO Box 11181
City: Chattanooga State: TN Zip Code: 37401-2181
Purpose of Disbursement: FEA: Generic Party GOTV VOIP Phones
Candidate Name:
Category/Type:
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24261
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 1044.33
FEA: GENERIC PARTY GOTV VOIP PHONES

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4528.62**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Raymond Soch
Mailing Address: 2132 Ruby St
City: Melrose Park State: IL Zip Code: 60164-2147
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24453
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Raymond Soch
Mailing Address: 2132 Ruby St
City: Melrose Park State: IL Zip Code: 60164-2147
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24482
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1450.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Raymond Soch
Mailing Address: 2132 Ruby St
City: Melrose Park State: IL Zip Code: 60164-2147
Purpose of Disbursement: FEA Cnslting: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24534
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1250.00
FEA CNSLTING: POLIT. GRAS-SROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3950.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Suzette Sosa
Mailing Address: 5540 Oakton Avenue
City: Morton Grove State: IL Zip Code: 60053-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24336
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): James Sprakties
Mailing Address: 12228 Black Road
City: Morrison State: IL Zip Code: 61270-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24454
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): James Sprakties
Mailing Address: 12228 Black Road
City: Morrison State: IL Zip Code: 61270-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24507
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): James Sprakties
Mailing Address: 12228 Black Road
City: Morrison State: IL Zip Code: 61270-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24556
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 750.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): State of Illinois
Mailing Address: State Board of Elections
1020 S. Spring St., P.O. Box 4187
City: Springfield State: IL Zip Code: 62708-
Purpose of Disbursement: FEA: Statewide Voter File
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24238
Date of Disbursement: 10 / 18 / 2010
Amount of Each Disbursement this Period: 500.00
FEA: STATEWIDE VOTER FILE

C.
Full Name (Last, First, Middle Initial): Raina Stoianof
Mailing Address: 6410 N. Hoyne
Unit 3
City: Chicago State: IL Zip Code: 60645-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24350
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2750.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Tom Stoner
Mailing Address: 630 N. 3rd Street #78
City: Philadelphia State: PA Zip Code: 19123-
Purpose of Disbursement: FEA Cnslting: Ballot Integrity
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24367
Date of Disbursement: 10 / 29 / 2010
Amount of Each Disbursement this Period: 5000.00
FEA CNSLTING: BALLOT INTE-GRITY

B.
Full Name (Last, First, Middle Initial): Paul Sumner
Mailing Address: 7506 N. Ridge Ave. Unit F
City: Chicago State: IL Zip Code: 60645-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24349
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Phyllis Sunner
Mailing Address: 7506 N. Ridge Blvd. Unit F
City: Chicago State: IL Zip Code: 60645-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24344
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1300.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7800.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Targeted Creative Communications, Inc.
Mailing Address: 106 S. Columbus St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Kirk
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24274
Date of Disbursement: 10 / 21 / 2010
Amount of Each Disbursement this Period: 89964.61
FEA VOLUNTEER MAIL-KIRK

B.
Full Name (Last, First, Middle Initial): Targeted Creative Communications, Inc.
Mailing Address: 106 S. Columbus St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Kirk
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24279
Date of Disbursement: 10 / 22 / 2010
Amount of Each Disbursement this Period: 78618.90
FEA VOLUNTEER MAIL-KIRK

C.
Full Name (Last, First, Middle Initial): Targeted Creative Communications, Inc.
Mailing Address: 106 S. Columbus St.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Volunteer Mail-Kirk
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24290
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 80340.00
FEA VOLUNTEER MAIL-KIRK

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **248923.51**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Alexander Torres
Mailing Address: 3433 West Melrose
City: Chicago State: IL Zip Code: 60618-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24333
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Ryan Tracy
Mailing Address: 1214 Portner Rd.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Food & Beverages Reimbursement
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24567
Date of Disbursement: MM 11 / DD 12 / YYYY 2010
Amount of Each Disbursement this Period: 191.12
FEA FOOD & BEVERAGES REIM-BURSEMENT

C.
Full Name (Last, First, Middle Initial): Ryan Tracy
Mailing Address: 1214 Portner Rd.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Mileage Reimbursement
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Transaction ID: 01130.E24569
Date of Disbursement: MM 11 / DD 12 / YYYY 2010
Amount of Each Disbursement this Period: 350.00
FEA MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2041.12**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Ryan Tracy
Mailing Address: 1214 Portner Rd.
City: Alexandria State: VA Zip Code: 22314-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24568
Date of Disbursement: 11 / 12 / 2010
Amount of Each Disbursement this Period: 199.23
FEA TRAVEL REIMBURSEMENT

B.
Full Name (Last, First, Middle Initial): Lance Trover
Mailing Address: 616 N 5th St
City: Vienna State: IL Zip Code: 62995-1633
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24457
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 3250.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Lance Trover
Mailing Address: 616 N 5th St
City: Vienna State: IL Zip Code: 62995-1633
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24508
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 3250.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 6699.23

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Lance Trover
Mailing Address: 616 N 5th St
City: Vienna State: IL Zip Code: 62995-1633
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24557
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 3750.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

B.
Full Name (Last, First, Middle Initial): Ty-comp
Mailing Address: 1105 E. War Memorial Drive
City: Peoria Heights State: IL Zip Code: 61616-
Purpose of Disbursement: FEA Volunteer Mail-Schilling
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24374
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 1000.00
FEA VOLUNTEER MAIL-SCHILL-ING

C.
Full Name (Last, First, Middle Initial): United States Postal Service
Mailing Address: 411 E Monroe
City: Springfield State: IL Zip Code: 62701-
Purpose of Disbursement: FEA Volunteer Mail-Hultgren
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24657
Date of Disbursement: 10 / 19 / 2010
Amount of Each Disbursement this Period: 8789.56
FEA VOLUNTEER MAIL-HULTGR-EN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13539.56**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial): United States Postal Service

Mailing Address: 411 E Monroe

City: Springfield State: IL Zip Code: 62701-

Purpose of Disbursement: FEA Volunteer Mail-Hultgren

Candidate Name:

Category/Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 01130.E24658

Date of Disbursement: 10 / 28 / 2010

Amount of Each Disbursement this Period: 5728.04

FEA VOLUNTEER MAIL-HULTGR-EN

B.

Full Name (Last, First, Middle Initial): Eric Voogd

Mailing Address: 1028 N. Honroe Street

City: Chicago State: IL Zip Code: 60622-

Purpose of Disbursement: FEA Cnslting. Political Grassroots

Candidate Name:

Category/Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 01130.E24278

Date of Disbursement: 10 / 22 / 2010

Amount of Each Disbursement this Period: 750.00

FEA CNSLTING. POLITICAL GRASSROOTS

C.

Full Name (Last, First, Middle Initial): Eric Wallace

Mailing Address: 5050 East End Ave. Unit 2A

City: Chicago State: IL Zip Code: 60615-

Purpose of Disbursement: FEA Cnslting. Political Grassroots

Candidate Name:

Category/Type:

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: 01130.E24314

Date of Disbursement: 10 / 28 / 2010

Amount of Each Disbursement this Period: 1500.00

FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7978.04**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Jennifer Wallace
Mailing Address: 5050 East End Ave. Unit 2A
City: Chicago State: IL Zip Code: 60615-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24313
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1500.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Darva Watkins
Mailing Address: 6139 S. Bernon St.
City: Chicago State: IL Zip Code: 60637-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24360
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 700.00
FEA CNSLTING. POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): David Watts
Mailing Address: 2500 North Van Dorn St. Apt #806
City: Alexandria State: VA Zip Code: 22302-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24458
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 4166.66
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6366.66**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): David Watts
Mailing Address: 2500 North Van Dorn St. Apt #806
City: Alexandria State: VA Zip Code: 22302-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24509
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 4166.66
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): David Watts
Mailing Address: 2500 North Van Dorn St. Apt #806
City: Alexandria State: VA Zip Code: 22302-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24558
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 4166.66
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: FEA Payroll
Candidate Name
Category/Type
Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify)
Transaction ID: 01130.E24221
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1732.17
FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10065.49**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24302
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1732.18
FEA PAYROLL

B.
Full Name (Last, First, Middle Initial): Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24387
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1732.17
FEA PAYROLL

C.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24222
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 1884.04
FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5348.39**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24304
Date of Disbursement: MM 10 / DD 28 / YYYY 2010
Amount of Each Disbursement this Period: 1884.05
FEA PAYROLL

B.
Full Name (Last, First, Middle Initial): Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: FEA Payroll
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24389
Date of Disbursement: MM 11 / DD 15 / YYYY 2010
Amount of Each Disbursement this Period: 1884.04
FEA PAYROLL

C.
Full Name (Last, First, Middle Initial): Andrew Weissert
Mailing Address: 2683 Stewart Avenue
City: Evanston State: IL Zip Code: 60201-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24459
Date of Disbursement: MM 10 / DD 14 / YYYY 2010
Amount of Each Disbursement this Period: 600.00
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4368.09**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Andrew Weissert
Mailing Address: 2683 Stewart Avenue
City: Evanston State: IL Zip Code: 60201-
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24510
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 600.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Andrew Weissert
Mailing Address: 2683 Stewart Avenue
City: Evanston State: IL Zip Code: 60201-
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24559
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 1100.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

C.
Full Name (Last, First, Middle Initial): Jay Werner
Mailing Address: 4834 W. Argyle St.
City: Chicago State: IL Zip Code: 60630-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24356
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1800.00
FEA CNSLTING. POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3500.00**

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 X 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): David Wilson
Mailing Address: 222 E. Chestnut St. Unit 8B
City: Chicago State: IL Zip Code: 60611-
Purpose of Disbursement: FEA Cnslting. Political Grassroots
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24312
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 1400.00
FEA CNSLTING. POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Wolfe Rewards & Loyalty
Mailing Address: 495 Mansfield Ave
City: Pittsburgh State: PA Zip Code: 15205-
Purpose of Disbursement: FEA Trvl & Mls-no vend. itemiz. req
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24474
Date of Disbursement: 10 / 26 / 2010
Amount of Each Disbursement this Period: 59785.60
FEA TRVL & MLS-NO VEND. ITEMIZ. REQ

C.
Full Name (Last, First, Middle Initial): Alexander George Yergin
Mailing Address: 2101 16th Street NW #718
City: Washington State: DC Zip Code: 20009-
Purpose of Disbursement: FEA Travel Reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: 01130.E24528
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 494.25
FEA TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **61679.85**

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Mike Zolnierowicz
Mailing Address: 3648 Venard Rd
City: Downers Grove State: IL Zip Code: 60515-1349
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24460
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 3500.00
FEA CNSLTING: POLITICAL GRASSROOTS

B.
Full Name (Last, First, Middle Initial): Mike Zolnierowicz
Mailing Address: 3648 Venard Rd
City: Downers Grove State: IL Zip Code: 60515-1349
Purpose of Disbursement: FEA Cnslting: Political Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24511
Date of Disbursement: 10 / 28 / 2010
Amount of Each Disbursement this Period: 3500.00
FEA CNSLTING: POLITICAL GRASSROOTS

C.
Full Name (Last, First, Middle Initial): Mike Zolnierowicz
Mailing Address: 3648 Venard Rd
City: Downers Grove State: IL Zip Code: 60515-1349
Purpose of Disbursement: FEA Cnsltng: Polit. Grassroots
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Transaction ID: 01130.E24560
Date of Disbursement: 11 / 15 / 2010
Amount of Each Disbursement this Period: 6500.00
FEA CNSLTNG: POLIT. GRASS-ROOTS

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13500.00**

TOTAL This Period (last page this line number only) ..... ▶ **869837.59**

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 10 / D D 15 / Y Y Y Y 2010	2337.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 2337.32
Transaction ID: H3C322849

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 10 / D D 18 / Y Y Y Y 2010	395.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 395.00
Transaction ID: H3C322850

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 10 / D D 19 / Y Y Y Y 2010	395.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 395.00
Transaction ID: H3C322851

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 10 / D D 21 / Y Y Y Y 2010	38760.02

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 38760.02
Transaction ID: H3C322853

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 10 / D D 28 / Y Y Y Y 2010	11850.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 11850.00
Transaction ID: H3C322854

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M 11 / D D 01 / Y Y Y Y 2010	14221.09

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative 14221.09
Transaction ID: H3C322856

ii) Generic Voter Drive .....
Transaction ID:

iii) Exempt Activities .....
Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) _____ **Transaction ID:**

b) _____ **Transaction ID:**

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)
Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) 67958.43

TOTAL This Period (Generic Voter Drive) 0.00

TOTAL This Period (Exempt Activities) 0.00

TOTAL This Period (Direct Fundraising) 0.00

TOTAL This Period (Direct Candidate Support) 0.00

TOTAL This Period (Public Communications Referring Only to Party) 0.00

TOTAL This Period (Total Amount Transferred) 67958.43

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

FOR LINE 21a OF FORM 3X

NAME OF COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Advantage Payroll Services

Mailing Address
1000 E Warrenville Rd

City: Naperville | State: IL | Zip Code: 60563-1867

Purpose of Disbursement:
Payroll Service Fees

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
430547.15

Date MM 10 / DD 14 / YYYY 2010
Transaction ID: H401130.E24226

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.14		23.10		29.24

B. Full Name (Last, First, Middle Initial)
Ace Sign Co.

Mailing Address
402 N. Fourth St.

City: Springfield | State: IL | Zip Code: 62702-

Purpose of Disbursement:
Party Printing

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
431334.94

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24229

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.95		312.05		395.00

C. Full Name (Last, First, Middle Initial)
Aloha Document Services, Inc.

Mailing Address
60 E. Van Buren St. S-1502

City: Chicago | State: IL | Zip Code: 60605-

Purpose of Disbursement:
Generic Party Printing

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
433236.48

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24230

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.56		363.27		459.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.65		698.42		884.07

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Building Maintenance Services

Mailing Address
3260 Northfield Dr.

City: Springfield | State: IL | Zip Code: 62702-

Purpose of Disbursement:
Janitorial Service

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
431724.94

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24232

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.90		308.10		390.00

B. Full Name (Last, First, Middle Initial)
Having A Ball Productions

Mailing Address
1935 S. 10 1/2 St.

City: Springfield | State: IL | Zip Code: 62703-

Purpose of Disbursement:
Party Decorations

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
432134.94

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24234

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.10		323.90		410.00

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

Mailing Address
1790 Kirby Pkwy

City: Germantown | State: TN | Zip Code: 38138-7420

Purpose of Disbursement:
Parcel Delivery

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
430939.94

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24235

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.49		310.30		392.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.49		942.30		1192.79

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
LexisNexis

Mailing Address
P.O. Box 2314

City: Carol Stream | State: IL | Zip Code: 60132-

Purpose of Disbursement:
Research Application

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
432776.65

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24236

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.53		299.18		378.71

B. Full Name (Last, First, Middle Initial)
Party Creations

Mailing Address
3651 S. 6th St. P.O. Box 3172

City: Springfield | State: IL | Zip Code: 62708-

Purpose of Disbursement:
Equipment Rental

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
432397.94

Date MM 10 / DD 15 / YYYY 2010
Transaction ID: H401130.E24237

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.23		207.77		263.00

C. Full Name (Last, First, Middle Initial)
Illinois Department of Agriculture

Mailing Address
P.O. Box 19427

City: Springfield | State: IL | Zip Code: 62794-9427

Purpose of Disbursement:
DuQuoin Fair Cart Rental

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
469652.32

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24245

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.15		722.85		915.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.91		1229.80		1556.71

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Home City Ice

Mailing Address
P.O. Box 111116

City: Cincinnati | State: OH | Zip Code: 45211-

Purpose of Disbursement:
Ice and Beverages

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
449276.58

Date 10 / 21 / 2010
Transaction ID: H401130.E24246

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.26		478.74		606.00

B. Full Name (Last, First, Middle Initial)
Quicksilver Mailing Services

Mailing Address
PO Box 1454

City: Springfield | State: IL | Zip Code: 62705-1454

Purpose of Disbursement:
Generic Non-FEA NoCand Mail Service

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
434440.30

Date 10 / 21 / 2010
Transaction ID: H401130.E24247

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.80		951.02		1203.82

C. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
435015.30

Date 10 / 21 / 2010
Transaction ID: H401130.E24248

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.81		1884.01		2384.82

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
435590.30

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24249

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

B. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
436165.30

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24250

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

C. Full Name (Last, First, Middle Initial)
Ace Sign Co.

Mailing Address
402 N. Fourth St.

City: Springfield | State: IL | Zip Code: 62702-

Purpose of Disbursement:
Party Printing

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
437242.30

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24251

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.42		396.58		502.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
346.92		1305.08		1652.00

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Adlexx Corporation

Mailing Address
PO Box 9594

City: Springfield | State: IL | Zip Code: 62791-9594

Purpose of Disbursement:
St. Fair Banner No Fed Cand.

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
468104.21

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24255

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
128.07		481.81		609.88

B. Full Name (Last, First, Middle Initial)
Party Creations

Mailing Address
3651 S. 6th St. P.O. Box 3172

City: Springfield | State: IL | Zip Code: 62708-

Purpose of Disbursement:
Equipment Rental

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
437824.78

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24256

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.32		460.16		582.48

C. Full Name (Last, First, Middle Initial)
Northfield Inn & Suites

Mailing Address
3280 Northfield Dr

City: Springfield | State: IL | Zip Code: 62702-1400

Purpose of Disbursement:
Party Room Rental and Catering

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
452147.33

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24257

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
276.03		1038.42		1314.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
526.42		1980.39		2506.81

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Wells Fargo Financial Leasing

Mailing Address
PO Box 7777

City: San Francisco | State: CA | Zip Code: 94120-7777

Purpose of Disbursement:
Postage Meter Lease

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
450832.88

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24258

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.82		1229.48		1556.30

B. Full Name (Last, First, Middle Initial)
Uncle Joes Sauces & Rubs

Mailing Address
201 N. Avenue

City: Ina | State: IL | Zip Code: 62846-

Purpose of Disbursement:
St.Fair Food & Bvgs. No Fed Cand.

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
474505.82

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24259

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1019.24		3834.26		4853.50

C. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
436740.30

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24260

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1466.81		5517.99		6984.80

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
FedEx Office

Mailing Address
Customer Administrative Services P.O. Box 672085

City: Dallas | State: TX | Zip Code: 75267-

Purpose of Disbursement:
Parcel Delivery

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
476938.07

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24262

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
510.77		1921.48		2432.25

B. Full Name (Last, First, Middle Initial)
City Water Light & Power

Mailing Address
Municipal Center West

City: Springfield | State: IL | Zip Code: 62757-

Purpose of Disbursement:
Utilities

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
448670.58

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24263

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
296.43		1115.14		1411.57

C. Full Name (Last, First, Middle Initial)
Aloha Document Services, Inc.

Mailing Address
60 E. Van Buren St. S-1502

City: Chicago | State: IL | Zip Code: 60605-

Purpose of Disbursement:
Generic Party Printing

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
468737.32

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24264

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.95		500.16		633.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
940.15		3536.78		4476.93

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
VoiceText.com

Mailing Address
211 East 7th Street 12th Floor

City: Austin State: TX Zip Code: 78701-

Purpose of Disbursement:
Telephone Service

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
444375.19

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24265

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.80		717.75		908.55

B. Full Name (Last, First, Middle Initial)
Huckaby Davis Lisker

Mailing Address
228 South Washington StreSuite 115

City: Alexandria State: VA Zip Code: 22314-

Purpose of Disbursement:
Cnslting:Accounting&FEC NonEmployee

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
447259.01

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24266

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
408.33		1536.09		1944.42

C. Full Name (Last, First, Middle Initial)
Clifton Gunderson LLP

Mailing Address
1301 W 22nd St Suite 1100

City: Oak Brook State: IL Zip Code: 60523-2006

Purpose of Disbursement:
Accounting Services

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
467494.33

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24268

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3222.87		12124.13		15347.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3822.00		14377.97		18199.97

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Brien Sheahan

Mailing Address
5 St. Regis Court

City: Elmhurst | State: IL | Zip Code: 60126-

Purpose of Disbursement:
Legal Consulting

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
443057.28

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24270

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1098.83		4133.67		5232.50

B. Full Name (Last, First, Middle Initial)
Brien Sheahan

Mailing Address
5 St. Regis Court

City: Elmhurst | State: IL | Zip Code: 60126-

Purpose of Disbursement:
Travel Reimbursement

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
443320.28

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24271

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.23		207.77		263.00

C. Full Name (Last, First, Middle Initial)
Brien Sheahan

Mailing Address
5 St. Regis Court

City: Elmhurst | State: IL | Zip Code: 60126-

Purpose of Disbursement:
Paper,Pens,Storage Containers

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
443466.64

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24272

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.74		115.62		146.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1184.80		4457.06		5641.86

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
LHF Specialty Advertising

Mailing Address
1106 North Stephens

City: Springfield | State: IL | Zip Code: 62702-

Purpose of Disbursement:
Party Momentos

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
445314.59

Date MM 10 / DD 21 / YYYY 2010
Transaction ID: H401130.E24273

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.27		742.13		939.40

B. Full Name (Last, First, Middle Initial)
Mack Communications

Mailing Address
1280 Iroquois Avenue Suite 406

City: Naperville | State: IL | Zip Code: 60563-

Purpose of Disbursement:
Communications Cnslt.

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
486977.87

Date MM 10 / DD 28 / YYYY 2010
Transaction ID: H401130.E24297

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

C. Full Name (Last, First, Middle Initial)
Law Offices of John Fogarty Jr.

Mailing Address
4043 N. Ravenswood Suite 225

City: Chicago | State: IL | Zip Code: 60613-

Purpose of Disbursement:
Legal Fees

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
481938.07

Date MM 10 / DD 28 / YYYY 2010
Transaction ID: H401130.E24309

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2297.27		8642.13		10939.40

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Advantage Payroll Services

Mailing Address
1000 E Warrenville Rd

City: Naperville | State: IL | Zip Code: 60563-1867

Purpose of Disbursement:
Payroll Service Fee

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
481977.87

Date MM 10 / DD 28 / YYYY 2010
Transaction ID: H401130.E24361

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.36		31.44		39.80

B. Full Name (Last, First, Middle Initial)
205 Randolph Investors, LLC

Mailing Address
205 W. Randolph

City: Chicago | State: IL | Zip Code: 60606-

Purpose of Disbursement:
Rent

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
493502.76

Date MM 10 / DD 29 / YYYY 2010
Transaction ID: H401130.E24363

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1034.23		3890.66		4924.89

C. Full Name (Last, First, Middle Initial)
415 Property Mgmt

Mailing Address
415 West State Street 104

City: Geneva | State: IL | Zip Code: 60134-

Purpose of Disbursement:
Rent

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
494042.76

Date MM 10 / DD 29 / YYYY 2010
Transaction ID: H401130.E24365

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.40		426.60		540.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1155.99		4348.70		5504.69

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Vista Realty, Inc.

Mailing Address
220 W. Carpenter St.

City: Springfield | State: IL | Zip Code: 62702-

Purpose of Disbursement:
Rent

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
488577.87

Date MM 10 / DD 29 / YYYY 2010
Transaction ID: H401130.E24366

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
336.00		1264.00		1600.00

B. Full Name (Last, First, Middle Initial)
Steve Ettinger

Mailing Address
1548 W Capitol Ave

City: Springfield | State: IL | Zip Code: 62704-1514

Purpose of Disbursement:
Travel Reimbursement

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496477.37

Date MM 11 / DD 11 / YYYY 2010
Transaction ID: H401130.E24377

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.52		62.14		78.66

C. Full Name (Last, First, Middle Initial)
Megan Piazza

Mailing Address
1236 Lake Avenue

City: Wilmette | State: IL | Zip Code: 60091-

Purpose of Disbursement:
Travel Reimbursement

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496541.00

Date MM 11 / DD 11 / YYYY 2010
Transaction ID: H401130.E24378

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.36		50.27		63.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
365.88		1376.41		1742.29

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
City Water Light & Power

Mailing Address
Municipal Center West

City: Springfield | State: IL | Zip Code: 62757-

Purpose of Disbursement:
Utilities

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496398.71

Date MM 11 / DD 11 / YYYY 2010
Transaction ID: H401130.E24379

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.52		1691.04		2140.56

B. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Bill Payment Center

City: Saginaw | State: MI | Zip Code: 48663-

Purpose of Disbursement:
Telephone Service

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
494258.15

Date MM 11 / DD 11 / YYYY 2010
Transaction ID: H401130.E24380

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.23		170.16		215.39

C. Full Name (Last, First, Middle Initial)
Mack Communications

Mailing Address
1280 Iroquois Avenue Suite 406

City: Naperville | State: IL | Zip Code: 60563-

Purpose of Disbursement:
Travel Reimbursement

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500552.69

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24383

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.38		20.26		25.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
500.13		1881.46		2381.59

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

FOR LINE 21a OF FORM 3X

NAME OF COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Advantage Payroll Services

Mailing Address
1000 E Warrenville Rd

City: Naperville | State: IL | Zip Code: 60563-1867

Purpose of Disbursement:
Payroll Service Fee

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500527.05

Date 11 / 15 / 2010
Transaction ID: H401130.E24391

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		24.02		30.40

B. Full Name (Last, First, Middle Initial)
Lake Area Disposal Services

Mailing Address
2106 E. Cornell

City: Springfield | State: IL | Zip Code: 62703-

Purpose of Disbursement:
Waste Disposal

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496575.56

Date 11 / 15 / 2010
Transaction ID: H401130.E24395

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.48		69.52		88.00

C. Full Name (Last, First, Middle Initial)
Sams Club

Mailing Address
P.O. Box 660617, Dept. 49

City: Dallas | State: TX | Zip Code: 75266-0617

Purpose of Disbursement:
Office Supplies

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496903.18

Date 11 / 15 / 2010
Transaction ID: H401130.E24396

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.86		172.54		218.40

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address
Bill Payment Center

City: Saginaw | State: MI | Zip Code: 48663-

Purpose of Disbursement:
Telephone Service

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496803.18

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24397

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.46		174.80		221.26

B. Full Name (Last, First, Middle Initial)
Puritan Springs Water

Mailing Address
1709 North Kickapoo

City: Lincoln | State: IL | Zip Code: 62656-

Purpose of Disbursement:
Bottled Water

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496581.92

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24398

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.34		5.02		6.36

C. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City: Southeastern | State: PA | Zip Code: 19398-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499875.49

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24399

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.66		164.24		207.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.46		344.06		435.52

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Coffee Unlimited

Mailing Address
1408 South Clinton, #1701

City: Chicago | State: IL | Zip Code: 60601-

Purpose of Disbursement:
Office Supplies

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499111.13

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.26		8.49		10.75

B. Full Name (Last, First, Middle Initial)
Hanson Information Systems

Mailing Address
2433 West White Oaks Dr.

City: Springfield | State: IL | Zip Code: 62704-

Purpose of Disbursement:
Internet Access

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499667.59

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.55		261.66		331.21

C. Full Name (Last, First, Middle Initial)
Commonwealth Edison

Mailing Address
P.O. Box 6111

City: Carol Stream | State: IL | Zip Code: 60197-

Purpose of Disbursement:
Utilities

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
498956.40

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.95		319.56		404.51

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
156.76		589.71		746.47

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

FOR LINE 21a OF FORM 3X

NAME OF COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City: Southeastern | State: PA | Zip Code: 19398-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500094.22

Date MM 11 / DD 15 / YYYY 2010

Transaction ID: H401130.E24403

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.93		172.80		218.73

B. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City: Southeastern | State: PA | Zip Code: 19398-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500209.12

Date MM 11 / DD 15 / YYYY 2010

Transaction ID: H401130.E24404

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.13		90.77		114.90

C. Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address
Lockbox 577

City: Carol Stream | State: IL | Zip Code: 60132-

Purpose of Disbursement:
Parcel Delivery

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496487.56

Date MM 11 / DD 15 / YYYY 2010

Transaction ID: H401130.E24405

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.01		56.45		71.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.07		320.02		405.09

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address
P.O. Box 790448

City: Saint Louis | State: MO | Zip Code: 63179-0448

Purpose of Disbursement:
Copier/Scanner Lease

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500876.22

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24406

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.94		255.59		323.53

B. Full Name (Last, First, Middle Initial)
Coffee Unlimited

Mailing Address
1408 South Clinton, #1701

City: Chicago | State: IL | Zip Code: 60601-

Purpose of Disbursement:
Office Supplies

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499149.38

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24407

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.03		30.22		38.25

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

Mailing Address
P.O. Box 689020

City: Des Moines | State: IA | Zip Code: 50368-

Purpose of Disbursement:
Office Supplies

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
498190.18

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24408

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.02		48.98		62.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.99		334.79		423.78

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Ameren Illinois

Mailing Address
P.O. Box 66884

City: Saint Louis | State: MO | Zip Code: 63166-

Purpose of Disbursement:
Utilities

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500986.46

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24409

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.15		87.09		110.24

B. Full Name (Last, First, Middle Initial)
Illinois Labor Law Poster Service

Mailing Address
1337 Wabash Avenue Ste. B

City: Springfield | State: IL | Zip Code: 62704-

Purpose of Disbursement:
Federal & State Labor Law Posters

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
501053.71

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24410

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.12		53.13		67.25

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

Mailing Address
P.O. Box 60036

City: Los Angeles | State: CA | Zip Code: 90060-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499100.38

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24411

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.24		113.74		143.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.51		253.96		321.47

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Watts Copy System

Mailing Address
2860 Stanton Avenue

City: Springfield | State: IL | Zip Code: 62708-

Purpose of Disbursement:
Copier Lease

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
499336.38

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24412

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.27		147.73		187.00

B. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City: Southeastern | State: PA | Zip Code: 19398-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500217.12

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24413

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.68		6.32		8.00

C. Full Name (Last, First, Middle Initial)
Ameren Cilco

Mailing Address
P.O. Box 66826

City: Saint Louis | State: MO | Zip Code: 63166-

Purpose of Disbursement:
Utilities

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500496.65

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24414

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.99		131.64		166.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.94		285.69		361.63

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
The Party Tree Rental, Inc.

Mailing Address
3233 Mathers Rd

City: Springfield | State: IL | Zip Code: 62711-

Purpose of Disbursement:
St. Fair Equip Rental No Fed. Cand.

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
498551.89

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.96		285.75		361.71

B. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
497478.18

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24417

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

C. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
498053.18

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24418

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.75		454.25		575.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.46		1194.25		1511.71

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 COMMIITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Aristotle International

Mailing Address
205 Pennsylvania Ave., SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement:
Computer Software

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
498128.18

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24419

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.75		59.25		75.00

B. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City: Southeastern | State: PA | Zip Code: 19398-

Purpose of Disbursement:
Cable Television

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
500330.02

Date MM 11 / DD 15 / YYYY 2010
Transaction ID: H401130.E24420

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.71		89.19		112.90

C. Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Mailing Address
188 Industrial Dr., Ste. 430

City: Elmhurst | State: IL | Zip Code: 60126-

Purpose of Disbursement:
Reimb: Insurance Policy Coverage

Category/Type

Activity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
496416.10

Date MM 11 / DD 12 / YYYY 2010
Transaction ID: H401130.E24579

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-26.23		-98.67		-124.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.23		49.77		63.00

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
14812.51	55723.29	70535.80

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [X] 1a [ ] 2

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Fund for American
Mailing Address: P.O. Box 65796
City: Washington | State: DC | Zip Code: 20035-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SLC322863
Date of Receipt: 11 / 01 / 2010
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date: 5000.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial): Dot Foods Inc.
Mailing Address: 1 Dot Way
PO Box 192
City: Mt. Sterling | State: IL | Zip Code: 62353-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SL01130.C321787
Date of Receipt: 10 / 18 / 2010
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date: 10000.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial): Riverstone Group, Inc
Mailing Address: 1701 5th Avenue
City: Moline | State: IL | Zip Code: 61265-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SLC322862
Date of Receipt: 11 / 01 / 2010
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date: 5000.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial): Koch Industries Inc.
Mailing Address: 4111 E. 37th St N
City: Wichita | State: KS | Zip Code: 67220-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SLC321788
Date of Receipt: 10 / 15 / 2010
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date: 10000.00
Account: LEVIN

SUBTOTAL of Receipts This Page (optional) **30000.00**

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

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [X] 1a [ ] 2

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial): Allergan Usa Inc.
Mailing Address: 2525 DuPont Drive
City: Irvine | State: CA | Zip Code: 92612-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SL01202.C323094
Date of Receipt: 11 / 22 / 2010
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date: 5000.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial): IL State Chamber Of Commerce
Mailing Address: 215 E. Adams St
City: Springfield | State: IL | Zip Code: 62701-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SLC322040
Date of Receipt: 10 / 27 / 2010
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date: 10000.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial): Davita Total Renal Care Inc
Mailing Address: PO Box 2037
City: Tacoma | State: WA | Zip Code: 98401-
Name of Employer or Principal Place of Business: Information Requested
Occupation: Information Requested

Transaction ID: SLC321796
Date of Receipt: 10 / 26 / 2010
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date: 5000.00
Account: LEVIN

SUBTOTAL of Receipts This Page (optional) **20000.00**

TOTAL This Period (last page this line number only) **50000.00**

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: The Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago State: IL Zip Code: 60603-1006
Purpose of Disbursement: Service Fee
Transaction ID: 4B01130.E24581
Date of Disbursement: 10 / 26 / 2010
Amount of Each Disbursement this Period: 22.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Amanda Wears
Mailing Address: 2008 W. Warner Avenue 1 E
City: Chicago State: IL Zip Code: 60618-3910
Purpose of Disbursement: FEA Travel Exp. Reimbursement
Transaction ID: 4B01130.E24655
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 186.19
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Illinois Republican Party
Mailing Address: LEVIN ACCOUNT 205 W. Randolph Street, #1245
City: Chicago State: IL Zip Code: 60606
Purpose of Disbursement: ACA PAC Dep. In Wrong Acct.
Transaction ID: 4B01130.E24660
Date of Disbursement: 10 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Steve Ettinger
Mailing Address: 1548 W Capitol Ave
City: Springfield State: IL Zip Code: 62704-1514
Purpose of Disbursement: FEA Travel Exp. Reimbursement
Transaction ID: 4B01130.E24649
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 295.90
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nancy Perlman
Mailing Address: 3847 N Whipple St
City: Chicago State: IL Zip Code: 60618-3521
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24593
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5554.09**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Megan Piazza
Mailing Address: 1236 Lake Avenue
City: Wilmette State: IL Zip Code: 60091
Purpose of Disbursement: FEA Travel Exp. Reimbursement
Transaction ID: 4B01130.E24650
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 239.35
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tyler Sidell
Mailing Address: 109 Kay Ct
City: East Peoria State: IL Zip Code: 61611-4511
Purpose of Disbursement: FEA Travel Exp. Reimbursement
Transaction ID: 4B01130.E24652
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 312.61
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Printing Ltd
Mailing Address: 101 E Main Cross St
City: Taylorville State: IL Zip Code: 62568-2225
Purpose of Disbursement: GOTV Poll Watcher Booklets
Transaction ID: 4B01130.E24648
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 2706.63
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mack Communications
Mailing Address: 1280 Iroquois Avenue Suite 406
City: Naperville State: IL Zip Code: 60563
Purpose of Disbursement: FEA Travel Exp. Reimbursement
Transaction ID: 4B01130.E24651
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 96.44
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kurt Fujio
Mailing Address: 1810 W. Touhy
City: Chicago State: IL Zip Code: 60626
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24587
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3455.03**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: John Arrington
Mailing Address: 31 E. 155th St.
City: Harvey State: IL Zip Code: 60426
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24583
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Robert Colby
Mailing Address: 16207 Eagle Ridge Dr.
City: Tinley Park State: IL Zip Code: 60477
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24586
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tonia Members
Mailing Address: 7736 S. May St.
City: Chicago State: IL Zip Code: 60620
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24591
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Peter Catalano
Mailing Address: 387 Lambert
City: Schaumburg State: IL Zip Code: 60193
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24584
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Anthony Catalano
Mailing Address: 455 Atlantic Avenue
City: Elk Grove Village State: IL Zip Code: 60007
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24585
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **450.00**

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

450.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Matthew Meyers
Mailing Address: 5441 N. Sawyer
City: Chicago State: IL Zip Code: 60625
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24592
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Suzette Sosa
Mailing Address: 5540 Oakton Avenue
City: Morton Grove State: IL Zip Code: 60053
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24594
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: John McGuire
Mailing Address: 4145 N Springfield Ave
City: Chicago State: IL Zip Code: 60618-1811
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24590
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Diane Peterson
Mailing Address: 9243 Latrobe
City: Skokie State: IL Zip Code: 60077
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24645
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Don Peterson
Mailing Address: 9243 Latrobe
City: Skokie State: IL Zip Code: 60077
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24644
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [x] 5 [ ] 4d

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Phyllis Sunner
Mailing Address: 7506 N. Ridge Blvd. Unit F
City: Chicago State: IL Zip Code: 60645
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24596
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Merle Kaplan
Mailing Address: 345 W. Fullerton Pkwy #606
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24589
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Paul Sumner
Mailing Address: 7506 N. Ridge Ave. Unit F
City: Chicago State: IL Zip Code: 60645
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24595
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Willie Howard
Mailing Address: 7456 N. Rockwell St.
City: Chicago State: IL Zip Code: 60645
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24588
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jay Werner
Mailing Address: 4834 W. Argyle St.
City: Chicago State: IL Zip Code: 60630
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24598
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **400.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: James Adinamis
Mailing Address: 555 W. Cornelia
City: Chicago State: IL Zip Code: 60657
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24582
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Darva Watkins
Mailing Address: 6139 S. Bernon St.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24597
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 400.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hillel Weinberg
Mailing Address: 311 N. Underwood St.
City: Falls Church State: VA Zip Code: 22046
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24599
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 400.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nathan Cardon
Mailing Address: 1400 Irving St. NW #626
City: Washington State: DC Zip Code: 20010
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24600
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 1000.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gina Griffin
Mailing Address: 174 W. Laurel St.
City: Philadelphia State: PA Zip Code: 19123
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24601
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 3000.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4850.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Eric Hutchins
Mailing Address: 5990 Richmond Highway #409
City: Alexandria State: VA Zip Code: 22303
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24602
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 1500.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thomas Stoner
Mailing Address: 630 N. 3rd St. #78
City: Philadelphia State: PA Zip Code: 19123
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24603
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 4000.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Venita Powells
Mailing Address: 6622 S. Evans Ave.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24604
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mary Lynch
Mailing Address: 6541 S. Rhodes
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24605
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Yolanda Vinso
Mailing Address: 6620 S. Evans
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24606
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5800.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crystal Hill
Mailing Address: 6622 S. Evans Ave.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24607
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sharon Smith
Mailing Address: 6620 S. Evans Ave.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24608
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Angela McCullen
Mailing Address: 6622 S. Evans Ave.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24609
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Erika Vinson
Mailing Address: 6001 S. Vernon #407
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24610
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bernadette Owens
Mailing Address: 6001 S. Vernon Apt. 908
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24611
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Celifika Lewis
Mailing Address: 6001 S. Vernon, Apt. 506
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24612
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Janice Hubbard
Mailing Address: 9321 S. Calumet Ave.
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24613
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lloyd Howard
Mailing Address: 8036 St. Lawrence
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24614
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richard Odonnell
Mailing Address: 3240 S. Aberdeen Rd., BR #1
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24615
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruby Turner
Mailing Address: 6414 S. King Dr., Apt. 1C
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24616
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sabreen Elamin
Mailing Address: 8235 S. Calumet
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24617
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Christen Crawford
Mailing Address: 3757 S. Wabash
City: Chicago State: IL Zip Code: 60653
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24618
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Frances Redman
Mailing Address: 6620 S. Evans
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24619
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lisa Marie Esper
Mailing Address: 6536 S. King Dr. Apt. 4D
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24620
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Robert Churchill
Mailing Address: 47 156th St.
City: Calumet City State: IL Zip Code: 60409
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24621
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Andre Maples
Mailing Address: 4500 S. Michigan
City: Chicago State: IL Zip Code: 60628
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24622
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Donna Montgomery
Mailing Address: 11016 S. Sangmon St.
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24623
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Latasha Armor
Mailing Address: 6750 S. Merle, 3rd Fl.
City: Chicago State: IL Zip Code: 60649
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24624
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dawn Williams
Mailing Address: 6463 S. Kenwood
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24625
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lloyd Coward
Mailing Address: 8036 St. Lawrence
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24626
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [x] 5 [ ] 4d

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Martinez Bremmer
Mailing Address: 8159 S. Kingston
City: Chicago State: IL Zip Code: 60617
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24627
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Latonya Cook
Mailing Address: 3049 Stafford Dr.
City: Harvey State: IL Zip Code: 60426
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24628
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnathan Battle
Mailing Address: 16422 California St.
City: Harvey State: IL Zip Code: 60426
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24629
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sonya Lewis
Mailing Address: 6100 S. Evans BSMT Apt.
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24630
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crystal Crosby
Mailing Address: 8230 S. Bishop
City: Chicago State: IL Zip Code: 60620
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24631
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **500.00**

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

500.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lasean Smith
Mailing Address: 10812 S. Halsted
City: Chicago State: IL Zip Code: 60628
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24632
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bruce Crosby
Mailing Address: 8230 S. Bishop
City: Chicago State: IL Zip Code: 60620
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24633
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sharon Thomas
Mailing Address: 9659 S. Greenwich
City: Chicago State: IL Zip Code: 60617
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24634
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jeremy Segal
Mailing Address: 2636 W. Winona St. #3E
City: Chicago State: IL Zip Code: 60625
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24635
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 400.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: William Crosby
Mailing Address: 8230 S. Bishop
City: Chicago State: IL Zip Code: 60620
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24636
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **750.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Isreal Sierra
Mailing Address: 1933 N. Kimball
City: Chicago State: IL Zip Code: 60647
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24637
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: David Augusto
Mailing Address: 2818 N. Christiana
City: Chicago State: IL Zip Code: 60647
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24638
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jose Cruz
Mailing Address: 3820 N. Central Park
City: Chicago State: IL Zip Code: 60647
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24639
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Prudencio Benitez
Mailing Address: 1847 N. Albany
City: Chicago State: IL Zip Code: 60647
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24640
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Isreal Acevedo
Mailing Address: 843 N. Francisco
City: Chicago State: IL Zip Code: 60622
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24641
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **300.00**

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

300.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Antonio Nieves
Mailing Address: 3432 N. Keeler
City: Chicago State: IL Zip Code: 60651
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24642
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Narcisiciso Orta
Mailing Address: 3127 N. Keating
City: Chicago State: IL Zip Code: 60647
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24643
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 50.00
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Alvin Hall
Mailing Address: 935 N. Carlisle
City: Round Lake State: IL Zip Code: 60073
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24646
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ricky Johnson
Mailing Address: 6446 S. Kenwood St. Apt. 102
City: Chicago State: IL Zip Code: 60637
Purpose of Disbursement: Poll Watcher GOTV Stipend
Transaction ID: 4B01130.E24647
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 100.00
Account: LEVIN

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Curt Conrad
Mailing Address: 2704 Cronin Dr
City: Springfield State: IL Zip Code: 62711-7083
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Transaction ID: 4B01130.E24653
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 1588.48
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1888.48**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Illinois Republican Party
Mailing Address: Cole Taylor Non-Federal Account, 205 W. Randolph Suite 1245
City: Chicago State: IL Zip Code: 60606
Purpose of Disbursement: Memo: GOTV Mileage Reimbursement
Transaction ID: 4B10317.E26415
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 261.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Randolph & Wells Self Parking
Mailing Address: 200 W. Randolph Street
City: Chicago State: IL Zip Code: 60601
Purpose of Disbursement: Memo: GOTV Parking Garage Reimburse
Transaction ID: 4B10317.E26418
Date of Disbursement: 10 / 26 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Doubletree Hotel
Mailing Address: 10 Brickyard Dr.
City: Bloomington State: IL Zip Code: 61701
Purpose of Disbursement: Memo: GOTV Hotel Reimbursement
Transaction ID: 4B10317.E26425
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 99.68
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lock Stock & Barrell
Mailing Address: 129 S Oakland Ave
City: Decatur State: IL Zip Code: 62522-2929
Purpose of Disbursement: Memo: GOTV Meal Reimbursement
Transaction ID: 4B10317.E26421
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 47.85
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Holiday Inn
Mailing Address: 350 W. Mart Center Drive
City: Chicago State: IL Zip Code: 60654
Purpose of Disbursement: Memo: GOTV Hotel Reimbursement
Transaction ID: 4B10317.E26420
Date of Disbursement: 10 / 27 / 2010
Amount of Each Disbursement this Period: 265.44
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Holiday Inn
Mailing Address: 350 W. Mart Center Drive
City: Chicago State: IL Zip Code: 60654
Purpose of Disbursement: Memo: GOTV Hotel Reimbursement
Transaction ID: 4B10317.E26422
Date of Disbursement: 11 / 04 / 2010
Amount of Each Disbursement this Period: 177.10
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Holiday Inn Express
Mailing Address: 640 N. Wabash Avenue
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: GOTV Hotel Reimbursement
Transaction ID: 4B10317.E26419
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 176.57
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Randolph Wells Self Parking
Mailing Address: 200 W. Randolph St.
City: Chicago State: IL Zip Code: 60606
Purpose of Disbursement: Memo: GOTV Parking Garage Reimburse
Transaction ID: 4B10317.E26423
Date of Disbursement: 11 / 04 / 2010
Amount of Each Disbursement this Period: 30.74
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ontario Garage
Mailing Address: 10 E. Ontario
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: GOTV Parking Garage Reimburse
Transaction ID: 4B10317.E26417
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 34.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Grand Lux
Mailing Address: 600 N Michigan Ave
City: Chicago State: IL Zip Code: 60611-3113
Purpose of Disbursement: Memo: GOTV Operation
Transaction ID: 4B10317.E26416
Date of Disbursement: 10 / 25 / 2010
Amount of Each Disbursement this Period: 126.10
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyatt Regency
Mailing Address: 151 E Wacker Dr
City: Chicago State: IL Zip Code: 60601-3764
Purpose of Disbursement: Memo: GOTV Hotel Reimbursement
Transaction ID: 4B10317.E26426
Date of Disbursement: 10 / 14 / 2010
Amount of Each Disbursement this Period: 350.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Joe Weiss
Mailing Address: 1683 Constitution Dr
City: Glenview State: IL Zip Code: 60026-7705
Purpose of Disbursement: REIMBURSEMENT: SEE BELOW
Transaction ID: 4B01130.E24654
Date of Disbursement: 11 / 11 / 2010
Amount of Each Disbursement this Period: 729.16
Account: LEVIN

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Google
Mailing Address: 1600 Amphitheatre Parkway
City: Mountain View State: CA Zip Code: 94043
Purpose of Disbursement: ITEMIZE: GOTV Ads/Website
Transaction ID: 4B10316.E24963
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 473.56
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Facebook
Mailing Address: 1601 S. California Ave.
City: Palo Alto State: CA Zip Code: 94304
Purpose of Disbursement: ITEMIZE: GOTV Ads/Website
Transaction ID: 4B10316.E24964
Date of Disbursement: 11 / 10 / 2010
Amount of Each Disbursement this Period: 255.60
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wolfe Rewards & Loyalty
Mailing Address: 495 Mansfield Ave
City: Pittsburgh State: PA Zip Code: 15205
Purpose of Disbursement: Itemize: See Below
Transaction ID: 4B01130.E24580
Date of Disbursement: 10 / 26 / 2010
Amount of Each Disbursement this Period: 27390.00
Account: LEVIN

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **28119.16**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fae Diethert
Mailing Address: 403 Muriel Ct.
City: Wheeling State: IL Zip Code: 60090
Purpose of Disbursement: Memo: Generic GOTV Incent Gift Card
Transaction ID: 4B10315.E24844
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Diethert Fae
Mailing Address: 403 Muriel Ct
City: Wheeling State: IL Zip Code: 60090
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25044
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sierwatka Steve
Mailing Address: 499 Muriel Ct
City: Wheeling State: IL Zip Code: 60090
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25045
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rebarchak Steve
Mailing Address: 1111 S Waukegan Rd. Unit 9
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25046
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rebarchak Steve
Mailing Address: 1111 S Waukegan Rd. Unit 9
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25816
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reed Mccall
Mailing Address: 1443 N Race
City: Arlington Heights | State: IL | Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25047
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reed Mccall
Mailing Address: 1443 N Race
City: Arlington Heights | State: IL | Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25048
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reed Mccall
Mailing Address: 1443 N Race
City: Arlington Heights | State: IL | Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25820
Date of Disbursement: M M 11 / D D 01 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reed Mccall
Mailing Address: 1443 N Race
City: Arlington Heights | State: IL | Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25821
Date of Disbursement: M M 11 / D D 01 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lopez Laura
Mailing Address: 1524 N Dryden Ave
City: Arlington Heights | State: IL | Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25049
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lopez Laura
Mailing Address: 1524 N Dryden Ave
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25050
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lopez Laura
Mailing Address: 1524 N Dryden Ave
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25818
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lopez Laura
Mailing Address: 1524 N Dryden Ave
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25819
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lopez Laura
Mailing Address: 1524 N Dryden Ave
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25095
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinard Wesley
Mailing Address: 1063 Half Day Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25051
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinard Wesley
Mailing Address: 1063 Half Day Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25052
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kottler Jeremy
Mailing Address: 540 Audubon Pl
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25053
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kottler Jeremy
Mailing Address: 540 Audubon Pl
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25054
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Svetov Kellan
Mailing Address: 2380 Highmoor Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25055
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Svetov Kellan
Mailing Address: 2380 Highmoor Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25056
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Diaz Enrique
Mailing Address: 144 Green Bay Rd, Apt 2
City: Highwood State: IL Zip Code: 60040
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25057
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Diaz Enrique
Mailing Address: 144 Green Bay Rd, Apt 2
City: Highwood State: IL Zip Code: 60040
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25058
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25059
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25060
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25497
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25498
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26173
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26174
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25834
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25835
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vaysburg Irvin
Mailing Address: 1931 Sheridan Road
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25836
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26170
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26171
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26172
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25548
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25549
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25104
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25061
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25062
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25102
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thiruliniski Eric
Mailing Address: 19 Buckingham Lane
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25103
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelso Marybeth
Mailing Address: 13155 Sheffield Lane
City: Beach Park State: IL Zip Code: 60083
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25063
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25064
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25065
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26175
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26176
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26177
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gunchick Wesley
Mailing Address: 1286 W. Everett
City: Des Plaines State: IL Zip Code: 60018
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25837
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26178
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26179
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26180
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25066
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25067
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25068
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25499
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Loomis Kate
Mailing Address: 845 N. Beverly Lane
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25500
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tamson Stephanie
Mailing Address: 8801 N Wisnor St Apt. 2
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25069
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tamson Stephanie
Mailing Address: 8801 N Wisnor St Apt. 2
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25070
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tamson Stephanie
Mailing Address: 8801 N Wisnor St Apt. 2
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25071
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Sherri
Mailing Address: 511 Jutson
City: Evanston State: IL Zip Code: 60202
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25072
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk David
Mailing Address: 511 Jutson
City: Evanston State: IL Zip Code: 60202
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25073
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buckner Alison
Mailing Address: 826 Shermer
City: Glenview State: IL Zip Code: 60025
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25074
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buckner Alison
Mailing Address: 826 Shermer
City: Glenview State: IL Zip Code: 60025
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25075
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ross Phil
Mailing Address: 225 Forest Way Drive
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25076
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ross Phil
Mailing Address: 225 Forest Way Drive
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25077
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25078
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25079
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25080
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25081
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25516
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25517
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25518
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25519
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25520
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25503
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25504
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25082
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25083
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25827
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sa Peter
Mailing Address: 2550 Colbewood Dr
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25828
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25084
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25085
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25086
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25087
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25535
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25536
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25537
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Kailey
Mailing Address: 14 White Barn Rd
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25538
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25528
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25529
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25530
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25088
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25832
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Taylor Carr
Mailing Address: 455 E Ohio
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25833
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25824
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25825
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25826
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25089
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25090
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25091
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kirk Charlie
Mailing Address: 418 Cherry Creek Ln
City: Prospect Heights State: IL Zip Code: 60070
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25092
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giallombardo Helen
Mailing Address: 3602 Lawson Rd
City: Glenview State: IL Zip Code: 60026
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25093
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giallombardo Helen
Mailing Address: 3602 Lawson Rd
City: Glenview State: IL Zip Code: 60026
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25094
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burton Sami
Mailing Address: 1114 N Hemlock
City: Mt Prospect State: IL Zip Code: 60056
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25096
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burton Sami
Mailing Address: 1114 N Hemlock
City: Mt Prospect State: IL Zip Code: 60056
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25822
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burton Sami
Mailing Address: 1114 N Hemlock
City: Mt Prospect State: IL Zip Code: 60056
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25823
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reeci Mccall
Mailing Address: 1443 N Race
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25097
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dahl Linda
Mailing Address: 14643 Trailway Drive
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25098
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dahl Linda
Mailing Address: 14643 Trailway Drive
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25099
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dahl Linda
Mailing Address: 14643 Trailway Drive
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25100
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dahl Linda
Mailing Address: 14643 Trailway Drive
City: Lake Forest State: IL Zip Code: 60045
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25101
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Deahl Evan
Mailing Address: 1330 Sheridan Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25508
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Deahl Evan
Mailing Address: 1330 Sheridan Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25509
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Deahl Evan
Mailing Address: 1330 Sheridan Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25539
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Deahl Evan
Mailing Address: 1330 Sheridan Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25105
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Deahl Evan
Mailing Address: 1330 Sheridan Rd
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25106
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Lana
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25107
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Lana
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25108
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Lana
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25510
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Lana
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25511
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Lana
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25512
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25532
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25533
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25534
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25109
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25110
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25111
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25112
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25829
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Dave
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25830
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26218
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26219
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25573
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25550
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25113
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25114
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25115
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25116
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25151
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berry Lawrence
Mailing Address: 5 Winthrop Ct.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25887
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Israel
Mailing Address: 20913 Homeland Road
City: Matteson State: IL Zip Code: 60443
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25117
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Israel
Mailing Address: 20913 Homeland Road
City: Matteson State: IL Zip Code: 60443
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25118
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Jim
Mailing Address: 220 Indiana Street
City: Park Forest State: IL Zip Code: 60466
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25119
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Jim
Mailing Address: 220 Indiana Street
City: Park Forest State: IL Zip Code: 60466
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25120
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Leslie
Mailing Address: 297 Fir Street
City: Park Forest State: IL Zip Code: 60466
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25121
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Leslie
Mailing Address: 297 Fir Street
City: Park Forest State: IL Zip Code: 60466
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25122
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Mairim
Mailing Address: 20913 Homeland Road
City: Matteson State: IL Zip Code: 60443
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25123
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Mairim
Mailing Address: 20913 Homeland Road
City: Matteson State: IL Zip Code: 60443
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25124
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schmitz Paul
Mailing Address: 2561 E. Lincoln Highway
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25125
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schmitz Paul
Mailing Address: 2561 E. Lincoln Highway
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25126
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25127
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25128
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25129
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25130
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25551
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26200
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26201
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26202
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25877
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schumann Herb
Mailing Address: 16 S. Country Squire Road
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25878
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25880
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25881
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25882
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25883
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25570
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25552
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25553
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26212
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26213
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26214
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25131
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25132
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25133
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojcik Mike
Mailing Address: 8705 S. 80th Court
City: Hickory Hills State: IL Zip Code: 60457
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25134
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25135
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25136
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25137
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25138
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25554
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25555
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25556
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25845
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25846
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Brown Katie
Mailing Address: 13808 S. Lawler
City: Crestwood State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25847
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25561
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25562
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25139
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25140
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25141
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Patrick
Mailing Address: 89 Old Creek Road
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25142
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25143
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25144
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25145
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26193
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26194
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25849
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25850
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goding Ben
Mailing Address: 525 W. Arlington Place
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25851
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25870
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25871
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25872
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25873
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26197
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26198
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26199
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25564
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25565
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25566
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25146
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25147
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25148
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zitrik Allison
Mailing Address: 444 W. St. James
City: Chicago State: IL Zip Code: 60610
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25149
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cross David
Mailing Address: 711 W Wrightwood
City: Chicago State: IL Zip Code: 60614
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25150
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boltz Greg
Mailing Address: 1912 Brighton St.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25152
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boltz Greg
Mailing Address: 1912 Brighton St.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25574
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boltz Greg
Mailing Address: 1912 Brighton St.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26220
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boltz Greg
Mailing Address: 1912 Brighton St.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26221
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boltz Greg
Mailing Address: 1912 Brighton St.
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25888
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bowen Laurel
Mailing Address: 829 Clyde Drive
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25889
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bowen Laurel
Mailing Address: 829 Clyde Drive
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26222
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bowen Laurel
Mailing Address: 829 Clyde Drive
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25575
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bowen Laurel
Mailing Address: 829 Clyde Drive
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25153
Date of Disbursement: MM 10 / DD 30 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burfield Patrick
Mailing Address: 352 S Sleight
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25154
Date of Disbursement: MM 10 / DD 30 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burfield Patrick
Mailing Address: 352 S Sleight
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25576
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burfield Patrick
Mailing Address: 352 S Sleight
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26223
Date of Disbursement: MM 11 / DD 02 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Burfield Patrick
Mailing Address: 352 S Sleight
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25890
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Carlson Nancy
Mailing Address: 21 4th Street
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25155
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cauley Ryan
Mailing Address: 521 Morris Lane
City: Hinsdale State: IL Zip Code: 60521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25156
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cochran Jason
Mailing Address: 425 Lake Ave.
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25157
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cochran Jason
Mailing Address: 425 Lake Ave.
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25158
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [x] 5 [ ] 4d

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cornelius Jim
Mailing Address: 6401 Clarendon Hills, #105
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25159
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Corrigan James
Mailing Address: 328 Rowan Court
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25160
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Corrigan James
Mailing Address: 328 Rowan Court
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25161
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cuthbert Mark
Mailing Address: 617 S Washington
City: Hinsdale State: IL Zip Code: 60521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25162
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Eastmond Andy
Mailing Address: 1805 Darien Club Dr.
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25163
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Eastmond Andy
Mailing Address: 1805 Darien Club Dr.
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25164
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Eastmond Margy
Mailing Address: 1805 Darien Club Dr.
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25165
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Eastmond Margy
Mailing Address: 1805 Darien Club Dr.
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25166
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giacomo Terrence
Mailing Address: 504 S. Wilmette Ave.
City: Westmont State: IL Zip Code: 60559
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25167
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giacomo Terrence
Mailing Address: 504 S. Wilmette Ave.
City: Westmont State: IL Zip Code: 60559
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25168
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giacomo Terrence
Mailing Address: 504 S. Wilmette Ave.
City: Westmont State: IL Zip Code: 60559
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25169
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Odonnell Allison
Mailing Address: 27w306 Victoria Lane
City: Winfield State: IL Zip Code: 60190
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25170
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wright Jeff
Mailing Address: 1017 Elizabeth
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25171
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wright Jeff
Mailing Address: 1017 Elizabeth
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26226
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zalzaleh Moe
Mailing Address: 825 S. Richmond Ave.
City: Westmont State: IL Zip Code: 60559
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25172
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zalzaleh Moe
Mailing Address: 825 S. Richmond Ave.
City: Westmont State: IL Zip Code: 60559
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25173
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Falcon Penny
Mailing Address: 383 West Park Ave
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25174
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Falcon Penny
Mailing Address: 383 West Park Ave
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25181
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wyatt Gabby
Mailing Address: 2590 Wyck Wood Ct
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25193
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wyatt Gabby
Mailing Address: 2590 Wyck Wood Ct
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25194
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wyatt Gabby
Mailing Address: 2590 Wyck Wood Ct
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25175
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wyatt Richy
Mailing Address: 2590 Wyck Wood Ct
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25176
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wyatt Richy
Mailing Address: 2590 Wyck Wood Ct
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25182
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Spang Kathie
Mailing Address: 38w144 Beckman Trail
City: Elgin State: IL Zip Code: 60124
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25184
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Spang Kathie
Mailing Address: 38w144 Beckman Trail
City: Elgin State: IL Zip Code: 60124
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25208
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Spang Kathie
Mailing Address: 38w144 Beckman Trail
City: Elgin State: IL Zip Code: 60124
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25192
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Spang Kathie
Mailing Address: 38w144 Beckman Trail
City: Elgin State: IL Zip Code: 60124
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25177
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schelich Amy
Mailing Address: 39w250 Forbes Dr
City: Geneva State: IL Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25178
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Danklefsen Vicki
Mailing Address: 39w249 E Mallory Dr
City: Geneva State: IL Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25179
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hays Jason
Mailing Address: 414 Pennsylvania Ave
City: Aurora State: IL Zip Code: 60506
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25180
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ray Jackie
Mailing Address: 2169 Savannah Rd
City: Elgin State: IL Zip Code: 60123
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25183
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goldstein Jim
Mailing Address: 1123 E 1900 N Rd
City: Gilman State: IL Zip Code: 60938
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25185
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sarley Chris
Mailing Address: 1317 Weston Drive
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25186
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roberts Craig
Mailing Address: 916 6th Street
City: Washington Dc State: DC Zip Code: 20001
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25187
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Willis Libby
Mailing Address: Rr2 Box 201b
City: Greenfield State: IL Zip Code: 62044
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25188
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Muller Virgina
Mailing Address: 216 Maryland Ave Ne Apt 405
City: Washington Dc | State: DC | Zip Code: 20002
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25189
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jynes Greta
Mailing Address: 3745 Gunston Rd
City: Alexandria | State: VA | Zip Code: 22302
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25190
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tooze Colin
Mailing Address: 4137 4th Rd N
City: Arlington | State: VA | Zip Code: 22203
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25191
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tooze Colin
Mailing Address: 4137 4th Rd N
City: Arlington | State: VA | Zip Code: 22203
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25209
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lee Craig
Mailing Address: 2730 Lorraine Circle
City: Geneva | State: IL | Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25195
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lee Craig
Mailing Address: 2730 Lorraine Circle
City: Geneva State: IL Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25196
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lee Craig
Mailing Address: 2730 Lorraine Circle
City: Geneva State: IL Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25197
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lee Craig
Mailing Address: 2730 Lorraine Circle
City: Geneva State: IL Zip Code: 60134
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25198
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinsey Natalie
Mailing Address: 304 E Harrison
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25199
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinsey Natalie
Mailing Address: 304 E Harrison
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25200
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinsey Natalie
Mailing Address: 304 E Harrison
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25219
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kinsey Natalie
Mailing Address: 304 E Harrison
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25220
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Trimble Dale
Mailing Address: 1n051 Partridge Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25201
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Trimble Dale
Mailing Address: 1n051 Partridge Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25202
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Borto Jack
Mailing Address: 318 W Oak Ave
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25203
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Borto Jack
Mailing Address: 318 W Oak Ave
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25204
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Borto Jack
Mailing Address: 318 W Oak Ave
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25217
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Borto Jack
Mailing Address: 318 W Oak Ave
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25218
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fitzpatrick Mike
Mailing Address: 26w130 Wood Lark Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25205
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fitzpatrick Mike
Mailing Address: 26w130 Wood Lark Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25206
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fitzpatrick Mike
Mailing Address: 26w130 Wood Lark Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25215
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fitzpatrick Mike
Mailing Address: 26w130 Wood Lark Dr
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25216
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pilcher Julie
Mailing Address: 270w071 Lowden Ave
City: Wheaton State: IL Zip Code: 60189
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25207
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Keleta Jen
Mailing Address: 1705 S Nelson St
City: Arlington State: VA Zip Code: 22204
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25210
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crowcroft Harry
Mailing Address: 1979 Tall Oaks Dr
City: Aurora State: IL Zip Code: 60505
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25211
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crowcroft Harry
Mailing Address: 1979 Tall Oaks Dr
City: Aurora State: IL Zip Code: 60505
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25212
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Coyle Kaity
Mailing Address: 147 S Lorraine Rd
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25213
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Coyle Kaity
Mailing Address: 147 S Lorraine Rd
City: Wheaton State: IL Zip Code: 60187
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25214
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 Fell St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25221
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Plaza Caitlin
Mailing Address: 98 E. Locust Apt 5
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25222
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Plaza Caitlin
Mailing Address: 98 E. Locust Apt 5
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26253
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Anderson Adrienne
Mailing Address: 705 S. Franklin Ave Apt 3
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25223
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25608
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25609
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25618
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26248
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26249
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25224
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25225
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25921
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Larson Andrew
Mailing Address: 10245 Tybo Trail
City: Roscoe State: IL Zip Code: 61073
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25922
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Manno Andrew
Mailing Address: 315 S. Fell Street
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25226
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Samuelson Sam
Mailing Address: P.o. Box 55
City: Clinton State: IL Zip Code: 61727
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25227
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Samuelson Sam
Mailing Address: P.o. Box 55
City: Clinton State: IL Zip Code: 61727
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25228
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Samuelson Sam
Mailing Address: P.o. Box 55
City: Clinton State: IL Zip Code: 61727
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25242
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Samuelson Sam
Mailing Address: P.o. Box 55
City: Clinton State: IL Zip Code: 61727
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25244
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sikes Joel
Mailing Address: 1204 N Madison St
City: Bloomington State: IL Zip Code: 61701
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25616
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sikes Joel
Mailing Address: 1204 N Madison St
City: Bloomington State: IL Zip Code: 61701
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25229
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Anthony
Mailing Address: 1567 N. College St
City: Decatur State: IL Zip Code: 62521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25230
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Anthony
Mailing Address: 1567 N. College St
City: Decatur State: IL Zip Code: 62521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25231
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Anthony
Mailing Address: 1567 N. College St
City: Decatur State: IL Zip Code: 62521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25245
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Anthony
Mailing Address: 1567 N. College St
City: Decatur State: IL Zip Code: 62521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25243
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubic David
Mailing Address: 138 E Beauford St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25232
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubic David
Mailing Address: 138 E Beauford St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25233
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mattheeson John
Mailing Address: 2007 Desoto Ct
City: Pekin State: IL Zip Code: 61554
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25234
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mattheeson John
Mailing Address: 2007 Desoto Ct
City: Pekin State: IL Zip Code: 61554
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25615
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pohlman Dana
Mailing Address: 98 W. Vernon Ave Apt 7
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25235
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pohlman Dana
Mailing Address: 98 W. Vernon Ave Apt 7
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25236
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pohlman Dana
Mailing Address: 98 W. Vernon Ave Apt 7
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25917
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pohlman Dana
Mailing Address: 98 W. Vernon Ave Apt 7
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25918
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik Andrew
Mailing Address: 138 E. Beaufort
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25606
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik Andrew
Mailing Address: 138 E. Beaufort
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25607
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik Andrew
Mailing Address: 138 E. Beaufort
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25237
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik Andrew
Mailing Address: 138 E. Beaufort
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25238
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hugdahl Molly
Mailing Address: 504 S. Fell Apt 13
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25239
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hugdahl Molly
Mailing Address: 504 S. Fell Apt 13
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26235
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tully Mary
Mailing Address: 206 W. Mulberry Apt 8
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25240
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Souk Ashley
Mailing Address: 919 Wilkins Hall
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25241
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Souk Ashley
Mailing Address: 919 Wilkins Hall
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25919
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hartigan Alexander
Mailing Address: 440 Kenilworth Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25246
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dolbeane Kristen
Mailing Address: 515 Pickening
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25247
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Scott Jason
Mailing Address: 719 Wright Hall
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25248
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Byrne Nate
Mailing Address: 301 Jefferson
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25249
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Waggoner John
Mailing Address: 604 Dale
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25250
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schottens Cody
Mailing Address: 1031 Hewett Hall
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25251
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Joel
Mailing Address: 711 Kingsley Ct
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25252
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25253
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25254
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25255
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25256
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25257
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25258
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25259
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25260
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25261
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25623
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25624
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25625
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25626
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25627
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25628
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25629
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25630
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25631
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25632
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Bridget
Mailing Address: 205 South Locust
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25633
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Linda
Mailing Address: 4322 Crossgate Drive
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25262
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Linda
Mailing Address: 4322 Crossgate Drive
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25263
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Linda
Mailing Address: 4322 Crossgate Drive
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25264
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Linda
Mailing Address: 4322 Crossgate Drive
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25265
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wagner Linda
Mailing Address: 4322 Crossgate Drive
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25266
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lash Kelly
Mailing Address: 801 West Delaware
City: Urbana State: IL Zip Code: 61807
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25267
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lash Kelly
Mailing Address: 801 West Delaware
City: Urbana State: IL Zip Code: 61807
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25268
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lash Kelly
Mailing Address: 801 West Delaware
City: Urbana State: IL Zip Code: 61807
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25269
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lash Kelly
Mailing Address: 801 West Delaware
City: Urbana State: IL Zip Code: 61807
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25270
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lash Kelly
Mailing Address: 801 West Delaware
City: Urbana State: IL Zip Code: 61807
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25271
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vetter Daniel
Mailing Address: 2202 Brownstone Court
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25272
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vetter Daniel
Mailing Address: 2202 Brownstone Court
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25273
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vetter Daniel
Mailing Address: 2202 Brownstone Court
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25274
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vetter Daniel
Mailing Address: 2202 Brownstone Court
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25275
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vetter Daniel
Mailing Address: 2202 Brownstone Court
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25276
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25277
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25278
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25279
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25280
Date of Disbursement: M M 10 / D D 30 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25281
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25634
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25635
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25636
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25637
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25638
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25933
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25934
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25935
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26262
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26263
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chestnut Chris
Mailing Address: 501 Village Park Way
City: Savoy State: IL Zip Code: 61874
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26264
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26269
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26270
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26271
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26272
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25941
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25942
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25943
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25639
Date of Disbursement: 10/31/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25640
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25641
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25642
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25282
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25283
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25284
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 101 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25285
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25286
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25287
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25288
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25289
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25944
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25945
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25946
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25947
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25644
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25645
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25646
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25643
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26273
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26274
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26275
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26276
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26277
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Juhas Jackie
Mailing Address: 1134 Grandview Drive
City: New Lenox State: IL Zip Code: 60451
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26278
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26279
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26260
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26261
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25932
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25647
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25648
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25649
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25650
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25948
Date of Disbursement: M M 11 / D D 01 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25949
Date of Disbursement: M M 11 / D D 01 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25290
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25291
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vermillion Jake
Mailing Address: 204 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25292
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25293
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25294
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25295
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25296
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25955
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25956
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25957
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25958
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25653
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25654
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25655
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25656
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26284
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26285
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26286
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26287
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thompson Will
Mailing Address: 709 West Green
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26288
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26289
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26290
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26291
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25657
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25658
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25659
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25660
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25959
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25960
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25961
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25297
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25298
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25299
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bishop Michael
Mailing Address: 1208 West Church Street
City: Champaign State: IL Zip Code: 61821
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25300
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25301
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25302
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25303
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25966
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25967
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25968
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25969
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26295
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26296
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26297
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25665
Date of Disbursement: 10/31/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25666
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kozlowski Mike
Mailing Address: 1007 South Locust, Spt#313
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25667
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25668
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25669
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25670
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25671
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26298
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26299
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26300
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25970
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25971
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25972
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25973
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25304
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25305
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Knecht Julie
Mailing Address: 565 Red Barn Lane
City: Barrington State: IL Zip Code: 60010
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25306
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25307
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25308
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25309
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26313
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26314
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26315
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25681
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25682
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25987
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25988
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25989
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roe Hannah
Mailing Address: 611 East Daniel
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25990
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25991
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25992
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25993
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25994
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25683
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25684
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25685
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26316
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26317
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26318
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25310
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Johnsen Jane
Mailing Address: 611 East Daniel Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25311
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25312
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25313
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26321
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26322
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26323
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26000
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26001
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ruggles Geno
Mailing Address: 4506 Stonebridge
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26002
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26009
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26010
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26011
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26330
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26331
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25691
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25692
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25693
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hong Christina
Mailing Address: 202 East Peabody
City: Champaign State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25314
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25315
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25316
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25317
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25318
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25319
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25320
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vachaparambil Jerry
Mailing Address: 245 East Niagara Ave
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25321
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25322
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25323
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25324
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25325
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25326
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25694
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25695
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25696
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25697
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25698
Date of Disbursement: MM 10 / DD 31 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bizios Alexandra
Mailing Address: 202 East Peabody Drive
City: Champaign State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26014
Date of Disbursement: MM 11 / DD 01 / YYYY 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26023
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25699
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25700
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26334
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26335
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25327
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25328
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25329
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26024
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farris Bob
Mailing Address: 802 N Cheney
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26025
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26026
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26027
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26028
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25330
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25331
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25332
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26336
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26337
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25701
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mckechen Ron
Mailing Address: 4032 Hazelbrook Drive
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25702
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25703
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25704
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26338
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26339
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25333
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25334
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25335
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26029
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26030
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Funk Elaine
Mailing Address: 2005 Claremont
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26031
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26032
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26033
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26034
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25336
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25337
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25338
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26340
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26341
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26342
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25705
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25706
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roth Ryan
Mailing Address: Rr 2 Box 31
City: Carrollton State: IL Zip Code: 62016
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25707
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25708
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25709
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25710
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25711
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25712
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26345
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26343
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26344
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25814
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25339
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25340
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25341
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25342
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26035
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pennman Travis
Mailing Address: 512 Vanderbuilt
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26036
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25343
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25344
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25345
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25346
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25347
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sheikh Adbi
Mailing Address: 2319 William Maxwell Lane
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25348
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Adkisson Sam
Mailing Address: 325 Keystone
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25349
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Adkisson Sam
Mailing Address: 325 Keystone
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26039
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Adkisson Sam
Mailing Address: 325 Keystone
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26346
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Adkisson Sam
Mailing Address: 325 Keystone
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26347
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Adkisson Sam
Mailing Address: 325 Keystone
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25713
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stewart Clarence
Mailing Address: 125 S Wesley
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25714
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stewart Clarence
Mailing Address: 125 S Wesley
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25715
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stewart Clarence
Mailing Address: 125 S Wesley
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26040
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stewart Clarence
Mailing Address: 125 S Wesley
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25350
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stewart Clarence
Mailing Address: 125 S Wesley
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25351
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Williams Mike
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25352
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Williams Mike
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26045
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Williams Mike
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26046
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Williams Mike
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26047
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Williams Mike
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25716
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcgowen Tabatha
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25717
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcgowen Tabatha
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26048
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcgowen Tabatha
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26049
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcgowen Tabatha
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26050
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcgowen Tabatha
Mailing Address: 800 S Durkin Drive Apt 454
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25353
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sronce Greg
Mailing Address: 205 S English
City: Sprinfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25354
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sronce Greg
Mailing Address: 205 S English
City: Sprinfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25718
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sronce Greg
Mailing Address: 205 S English
City: Sprinfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26349
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sronce Greg
Mailing Address: 205 S English
City: Sprinfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26350
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sronce Greg
Mailing Address: 205 S English
City: Sprinfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26351
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meir Jb
Mailing Address: 405 Treeline Lane
City: Springfield, State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26352
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meir Jb
Mailing Address: 405 Treeline Lane
City: Springfield, State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26353
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meir Jb
Mailing Address: 405 Treeline Lane
City: Springfield, State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26354
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meir Jb
Mailing Address: 405 Treeline Lane
City: Springfield, State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25719
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meir Jb
Mailing Address: 405 Treeline Lane
City: Springfield, State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25355
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Rich
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25356
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Rich
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25357
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Rich
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25358
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Rich
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25720
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Rich
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25721
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cook April
Mailing Address: 308 Estes Park Drive
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25722
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cook April
Mailing Address: 308 Estes Park Drive
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25723
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cook April
Mailing Address: 308 Estes Park Drive
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25359
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cook April
Mailing Address: 308 Estes Park Drive
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25360
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cook April
Mailing Address: 308 Estes Park Drive
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26054
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26058
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26059
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26060
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25361
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25362
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25363
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25724
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25725
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26359
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bradley Emily
Mailing Address: 1837 N 9th Street
City: Springfield, State: IL Zip Code: 62702
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26360
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26361
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26362
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25364
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25365
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25366
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25726
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25727
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26061
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26062
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Richardson John
Mailing Address: 3800 Oakwood Circle
City: Taylorville State: IL Zip Code: 62568
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26063
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26064
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26065
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26066
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26067
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26068
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26069
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26070
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25728
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25729
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25730
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25731
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25732
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25733
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25734
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25735
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25367
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25368
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25369
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25370
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25371
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25372
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25373
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25374
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26363
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26364
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26365
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26366
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26367
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26368
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26369
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26370
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26371
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26372
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26373
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26374
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26375
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26376
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Griswold Andrew
Mailing Address: 500 West Monroe
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26377
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25375
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25376
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25377
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25736
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25737
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25738
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tozer Ryan
Mailing Address: 548 Canedy
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26071
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26075
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26092
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26093
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25741
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25742
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25743
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25378
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25413
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25392
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26378
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26379
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave.
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26380
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcnamara Colin
Mailing Address: 68 Annebriar Dr.
City: Maryville State: IL Zip Code: 62062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25379
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcnamara Cameron
Mailing Address: 68 Annebriar Dr.
City: Maryville State: IL Zip Code: 62062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25380
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 221 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25381
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buettner Ruth
Mailing Address: 1326 Eileen
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25382
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buettner Ruth
Mailing Address: 1326 Eileen
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26384
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Stephen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25383
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Stephen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25394
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Nancy
Mailing Address: 205 S. Locust St.
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25391
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cahalan Nancy
Mailing Address: 205 S. Locust St.
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25384
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25385
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25396
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25407
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26383
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25757
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25739
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rohan Dora
Mailing Address: 206 Crestwood Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25740
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Gwen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26080
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Gwen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26081
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Gwen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26382
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Gwen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25395
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kukielski Gwen
Mailing Address: 934 Ivy Ct.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25386
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ebbens Carolyn
Mailing Address: 5235 Luzzane Ln.
City: Indianapolis State: IN Zip Code: 46220
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25387
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ebbens Carolyn
Mailing Address: 5235 Luzzane Ln.
City: Indianapolis State: IN Zip Code: 46220
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25403
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ebbens Carolyn
Mailing Address: 5235 Luzzane Ln.
City: Indianapolis State: IN Zip Code: 46220
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25393
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ebbens Carolyn
Mailing Address: 5235 Luzzane Ln.
City: Indianapolis State: IN Zip Code: 46220
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25414
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ebbens Carolyn
Mailing Address: 5235 Luzzane Ln.
City: Indianapolis State: IN Zip Code: 46220
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26387
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25754
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25755
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25756
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26390
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25415
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25397
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25388
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25405
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26094
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Walters Corey
Mailing Address: 705 Cheshire Rd.
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26095
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hughes Jerome
Mailing Address: 1254 State St.
City: Alton State: IL Zip Code: 62002
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25389
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hughes Jerome
Mailing Address: 1254 State St.
City: Alton State: IL Zip Code: 62002
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25402
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simpson Thomas
Mailing Address: 7185 Eagles Mount Ln
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25390
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Jack
Mailing Address: 9713 Old Lincoln Tr.
City: Fairview Hts State: IL Zip Code: 62208
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25398
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Carolyn
Mailing Address: 9713 Old Lincoln Tr.
City: Fairview Hts State: IL Zip Code: 62208
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25399
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clark Valerie
Mailing Address: 71 Christmas Tree Pt.
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25400
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Karl Noella
Mailing Address: 524 Lone Robin
City: Troy State: IL Zip Code: 62294
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25401
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 211 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25404
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 211 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25416
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 211 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26386
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 211 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26087
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Futrell Velta
Mailing Address: 211 Bernice
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26088
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Oger Bill
Mailing Address: 2415 Linda Ave
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25406
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Voight Jason
Mailing Address: 337 Glen Carbon Rd
City: Glen Carbon State: IL Zip Code: 62034
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25408
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Voight Jason
Mailing Address: 337 Glen Carbon Rd
City: Glen Carbon State: IL Zip Code: 62034
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26388
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wirth Carlene
Mailing Address: 173 Sandridge Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26389
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wirth Carlene
Mailing Address: 173 Sandridge Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25409
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wirth Carlene
Mailing Address: 173 Sandridge Dr.
City: Collinsville State: IL Zip Code: 62234
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26090
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Peterson George
Mailing Address: 728 Deerfield Dr
City: Swansea State: IL Zip Code: 62226
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25410
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thomas Andy
Mailing Address: 32 Grainey Dr
City: Glen Carbon State: IL Zip Code: 62034
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25411
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thomas Andy
Mailing Address: 32 Grainey Dr
City: Glen Carbon State: IL Zip Code: 62034
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25758
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dehne Ruth
Mailing Address: 8 Cherrywood Ct
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25412
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Benner Pat
Mailing Address: 5107 Lookout Ridge
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25417
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Benner Pat
Mailing Address: 5107 Lookout Ridge
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25761
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Benner Pat
Mailing Address: 5107 Lookout Ridge
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26391
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Benner Pat
Mailing Address: 5107 Lookout Ridge
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26098
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meier Jane
Mailing Address: 310 E York St
City: Camp Point State: IL Zip Code: 62320
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26099
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meier Jane
Mailing Address: 310 E York St
City: Camp Point State: IL Zip Code: 62320
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25418
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crank Shirley
Mailing Address: 228 Lexington
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25419
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crank Shirley
Mailing Address: 228 Lexington
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25762
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crank Shirley
Mailing Address: 228 Lexington
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26100
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ensley Rick
Mailing Address: 907 S 5th St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25420
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dulaney Dave
Mailing Address: 3800 Stonegate Rd
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25421
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25422
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25423
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25424
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25763
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25764
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26392
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26393
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26394
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26101
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26102
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dearing Matthew
Mailing Address: 2602 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26103
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kendrick Juett
Mailing Address: 3000 Lincoln Hill N.e.
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25765
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kendrick Juett
Mailing Address: 3000 Lincoln Hill N.e.
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25425
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Huner Bill
Mailing Address: 2432 Monroe
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25426
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Huner Wyatt
Mailing Address: 2432 Monroe
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25427
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Kathy
Mailing Address: 4333 S 24th St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25428
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Pfaffee Velma
Mailing Address: 2912 Spring
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25429
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Helton Dawn
Mailing Address: 460 E 1300th St
City: Payson State: IL Zip Code: 62360
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25430
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Helton Allsion
Mailing Address: 460 E 1300th St
City: Payson State: IL Zip Code: 62360
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25431
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyslop Harold
Mailing Address: 615 S 19th
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25432
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyslop Harold
Mailing Address: 615 S 19th
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25766
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nichols Richard
Mailing Address: 2201 Sycamore
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25433
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farha Aaron
Mailing Address: 2043 Vermont
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25434
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mollins Carol
Mailing Address: 310 Lexington
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25435
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mollins Carol
Mailing Address: 310 Lexington
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25436
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mollins Carol
Mailing Address: 310 Lexington
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26395
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mollins Carol
Mailing Address: 310 Lexington
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26104
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morrison Sam
Mailing Address: 2241 College Ave
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26396
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morrison Sam
Mailing Address: 2241 College Ave
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25437
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morrison Sam
Mailing Address: 2241 College Ave
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25438
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25439
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25440
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25441
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26397
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26398
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26399
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25768
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25769
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26106
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moore Kyle
Mailing Address: 2897 Hampshire
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26107
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Luke
Mailing Address: 4333 S 24th
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25444
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Luke
Mailing Address: 4333 S 24th
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25775
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Luke
Mailing Address: 4333 S 24th
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25776
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Luke
Mailing Address: 4333 S 24th
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25442
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Neuser Luke
Mailing Address: 4333 S 24th
City: Quincy State: IL Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25443
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Allen Rebecca
Mailing Address: 32951 E 1400 North Rd
City: Cullom State: IL Zip Code: 60929
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25445
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25446
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25447
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25448
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26122
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26123
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26124
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25779
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25780
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25490
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blake Karla
Mailing Address: 858 Starlight Ct
City: Herren State: IL Zip Code: 62948
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25491
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25781
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25782
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25783
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25449
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25450
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25451
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Clanahan Chase
Mailing Address: 1108 East 5th St
City: Metropolis State: IL Zip Code: 62960
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25452
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25453
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25454
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25785
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25786
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25787
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26125
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26126
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26127
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26128
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25492
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25493
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Crabtree Adrienna
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25494
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Franklin Debra
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25455
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Brittany
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25456
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Brittany
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25788
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Brittany
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25789
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Brittany
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25495
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Brittany
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25806
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25807
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25808
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25496
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25790
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25791
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Godwin Rob
Mailing Address: 16183 Key Rd
City: Hurst State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25457
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25458
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25459
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25792
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25793
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26129
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26130
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25809
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25810
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hope Joann
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25811
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25812
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25813
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26131
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26132
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26133
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26134
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25460
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jackson Eric
Mailing Address: E Sloan St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26161
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelley Mark
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25461
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelley Mark
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25462
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelley Mark
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25794
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelley Mark
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26135
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelley Mark
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26136
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: King Lou
Mailing Address: 1012 S Granger St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25463
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: King Lou
Mailing Address: 1012 S Granger St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25464
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25465
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26162
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26163
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26164
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26137
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Long Caleb
Mailing Address: 517 W Lincoln St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26138
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcsparin Jerry
Mailing Address: 22505 Shelton Ln
City: Stonefort State: IL Zip Code: 62987
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25466
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcsparin Jerry
Mailing Address: 22505 Shelton Ln
City: Stonefort State: IL Zip Code: 62987
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25467
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ragain Joy
Mailing Address: 1113 Folgers St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25468
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ragain Joy
Mailing Address: 1113 Folgers St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25469
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ragain Joy
Mailing Address: 1113 Folgers St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26411
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ragain Joy
Mailing Address: 1113 Folgers St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26142
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ragain Joy
Mailing Address: 1113 Folgers St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26143
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25798
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25799
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25800
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26147
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26148
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26149
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25470
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25471
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25472
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Sandra
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25473
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25474
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25475
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25476
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26412
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26413
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 10.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26145
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26146
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25795
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25796
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25797
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Ramsey Mike
Mailing Address: 209 N Anna St
City: West Frankfort State: IL Zip Code: 62896
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26144
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reece Laura
Mailing Address: 1700 Doctor Springs Rd
City: Desoto State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26150
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reece Laura
Mailing Address: 1700 Doctor Springs Rd
City: Desoto State: IL Zip Code: 62924
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25477
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Joel
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25478
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Joel
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25479
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Joel
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26155
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Joel
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25801
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Joel
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25802
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swatschero David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25803
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swatschero David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26156
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swatschero David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26157
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swatschero David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25480
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swatschero David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25481
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Swearingen Matt
Mailing Address: 1101 E Grand Ave, Ste 1
City: Carbondale State: IL Zip Code: 62901
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25482
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Talbert David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25483
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Talbert David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26158
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thorpe David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25484
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thorpe David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25485
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thorpe David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25804
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Thorpe David
Mailing Address: 1101 N Madison St
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25805
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Yackey Beverly
Mailing Address: Box 252
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25486
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Yackey Beverly
Mailing Address: Box 252
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26160
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26118
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26119
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26120
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26121
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25487
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25488
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25489
Date of Disbursement: 10 / 30 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25777
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Birkhead Tom
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25778
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sous Victoria
Mailing Address: 649 Trace Dr.apt 2
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25501
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sous Victoria
Mailing Address: 649 Trace Dr.apt 2
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25502
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Chada Mike
Mailing Address: 426 Inverrrary Lane
City: Deerfield State: IL Zip Code: 60015
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25505
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Geha Georgette
Mailing Address: 9421 Kostner
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25506
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Geha Georgette
Mailing Address: 9421 Kostner
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25507
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Dan
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25513
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Dan
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25514
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Dan
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25515
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Parashchak Dan
Mailing Address: 202 W. 79th Street
City: Willowbrook State: IL Zip Code: 60527
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25817
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25521
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25522
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25523
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26185
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26186
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26184
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25546
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Gabe
Mailing Address: 4450 Davis St
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25547
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Rubin Daniel
Mailing Address: 8934 Samoset
City: Skokie State: IL Zip Code: 60076
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25524
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25525
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25526
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25527
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26167
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26168
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Molly
Mailing Address: 14 White Barn Rd.
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26169
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Radke Rosemary
Mailing Address: 1064 Copperstone Ct
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25531
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25540
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25541
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Simon Nick
Mailing Address: 782 Greenwood Road
City: Northbrook State: IL Zip Code: 60062
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25542
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tampson Stephanie
Mailing Address: 8801 N Wisner St
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25543
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tampson Stephanie
Mailing Address: 8801 N Wisner St
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25544
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tampson Stephanie
Mailing Address: 8801 N Wisner St
City: Niles State: IL Zip Code: 60714
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25545
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25557
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26209
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26210
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26211
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25856
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25857
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Straits Alyssa
Mailing Address: 10341 S. 51st Ct.
City: Oak Lawn | State: IL | Zip Code: 60453
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25848
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyc Matt
Mailing Address: 5322 S. Narragansett
City: Chicago | State: IL | Zip Code: 60638
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25884
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyc Matt
Mailing Address: 5322 S. Narragansett
City: Chicago | State: IL | Zip Code: 60638
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26215
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyc Matt
Mailing Address: 5322 S. Narragansett
City: Chicago | State: IL | Zip Code: 60638
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26216
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyc Matt
Mailing Address: 5322 S. Narragansett
City: Chicago State: IL Zip Code: 60638
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26217
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hyc Matt
Mailing Address: 5322 S. Narragansett
City: Chicago State: IL Zip Code: 60638
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25558
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sindelar Clarence
Mailing Address: 12927 E. Tanglewood Circle
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25559
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sindelar Clarence
Mailing Address: 12927 E. Tanglewood Circle
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26207
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sindelar Clarence
Mailing Address: 12927 E. Tanglewood Circle
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26208
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sindelar Clarence
Mailing Address: 12927 E. Tanglewood Circle
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25879
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bezanis Diana
Mailing Address: 11137 Helena Dr.
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25560
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schaible Matt
Mailing Address: 8846 S. Hamilton
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25563
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schaible Matt
Mailing Address: 8846 S. Hamilton
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25866
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schaible Matt
Mailing Address: 8846 S. Hamilton
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25867
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schaible Matt
Mailing Address: 8846 S. Hamilton
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25868
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schaible Matt
Mailing Address: 8846 S. Hamilton
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25869
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26204
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26205
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26206
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25567
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25568
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Roupas Mike
Mailing Address: 9825 W. Circle Parkway
City: Palos Park State: IL Zip Code: 60464
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25569
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Anderson Janice
Mailing Address: 1527 Wedgefield Circle
City: Naperville State: IL Zip Code: 60563
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25571
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Anderson Janice
Mailing Address: 1527 Wedgefield Circle
City: Naperville State: IL Zip Code: 60563
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25885
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Atkinson Kory
Mailing Address: 160 Brendon Ct.
City: Roselle State: IL Zip Code: 60172
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25886
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Atkinson Kory
Mailing Address: 160 Brendon Ct.
City: Roselle State: IL Zip Code: 60172
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25572
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Emerson Masters Debra
Mailing Address: 205 E. Butterfield Rd.
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25577
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Emerson Masters Debra
Mailing Address: 205 E. Butterfield Rd.
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25578
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Emerson Masters Debra
Mailing Address: 205 E. Butterfield Rd.
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25579
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Emerson Masters Debra
Mailing Address: 205 E. Butterfield Rd.
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25891
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Emerson Masters Debra
Mailing Address: 205 E. Butterfield Rd.
City: Elmhurst State: IL Zip Code: 60126
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25892
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Giorno Sharon
Mailing Address: 211 Gazebo Lane
City: Lombard State: IL Zip Code: 60148
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25580
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goers Richard
Mailing Address: 234 N. Quincy
City: Hinsdale State: IL Zip Code: 60521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25581
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goers Richard
Mailing Address: 234 N. Quincy
City: Hinsdale State: IL Zip Code: 60521
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25582
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jaeger Jeffrey
Mailing Address: 2136 W Lemoyne
City: Chicago State: IL Zip Code: 60622
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25583
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jennings Tom
Mailing Address: 2670 Yorkshire Ln
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25584
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jennings Tom
Mailing Address: 2670 Yorkshire Ln
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25585
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kuhaneck David
Mailing Address: 137 Iris Rd.
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25586
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Laz David
Mailing Address: 2110 Babst Court
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25587
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Laz David
Mailing Address: 2110 Babst Court
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25588
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mann Sarah
Mailing Address: 905 Fieldside Ln.
City: Aurora State: IL Zip Code: 60504
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25589
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mann Sarah
Mailing Address: 905 Fieldside Ln.
City: Aurora State: IL Zip Code: 60504
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25590
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mann Sarah
Mailing Address: 905 Fieldside Ln.
City: Aurora State: IL Zip Code: 60504
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25591
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mann Sarah
Mailing Address: 905 Fieldside Ln.
City: Aurora State: IL Zip Code: 60504
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25592
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mann Sarah
Mailing Address: 905 Fieldside Ln.
City: Aurora State: IL Zip Code: 60504
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25593
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moustos Danny
Mailing Address: 548 73rd Street, Apt. 103
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25594
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Moustos Danny
Mailing Address: 548 73rd Street, Apt. 103
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25595
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Murphy Sarah
Mailing Address: 409 Robin Hill Ct.
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25596
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Philip Binu
Mailing Address: 2303 Sisters Ave.
City: Naperville State: IL Zip Code: 60564
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25597
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Philip Binu
Mailing Address: 2303 Sisters Ave.
City: Naperville State: IL Zip Code: 60564
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25598
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schneider Cindy
Mailing Address: 912 Williamsburg Dr.
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25599
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Schneider Cindy
Mailing Address: 912 Williamsburg Dr.
City: Naperville State: IL Zip Code: 60540
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25600
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tucci Alan
Mailing Address: 2416 Litchfield Ct.
City: Naperville State: IL Zip Code: 60565
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25601
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vanchiei Joe
Mailing Address: 8717 Royal Swan Lane
City: Darien State: IL Zip Code: 60561
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25602
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wehr Lisa
Mailing Address: 1302 Sumner Street
City: Wheaton State: IL Zip Code: 60189
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25603
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zanfardino Jackie
Mailing Address: 1390 Lilac Ln.
City: Addison State: IL Zip Code: 60101
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25604
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zanfardino Jackie
Mailing Address: 1390 Lilac Ln.
City: Addison State: IL Zip Code: 60101
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25605
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25610
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25611
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25619
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25913
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25914
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26254
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vankampen Meredith
Mailing Address: 609 S. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26255
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 E. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25612
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 E. Fell Apt 19
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25613
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik David
Mailing Address: 138 E. Beaufort Street
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25614
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morris Jordan
Mailing Address: 701 N Fell St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25617
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morris Jordan
Mailing Address: 701 N Fell St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25621
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 S. Fell
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26250
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 S. Fell
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26251
Date of Disbursement: 11/02/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 S. Fell
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25620
Date of Disbursement: 10/31/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 S. Fell
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25915
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mickelson Melissa
Mailing Address: 609 S. Fell
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25916
Date of Disbursement: 11/01/2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Limon Nick
Mailing Address: 3089 Wildhorse St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25906
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Limon Nick
Mailing Address: 3089 Wildhorse St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25622
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25651
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25652
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25950
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25951
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26280
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heffner Lauraleigh
Mailing Address: 901 Colllege Court
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26281
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26292
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26293
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26294
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25664
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25962
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25963
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25964
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25965
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25661
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25662
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Baker Matt
Mailing Address: 1007 South Locust, Apt#310
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25663
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25974
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25975
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25976
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25977
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26301
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26302
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26303
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25995
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25996
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25997
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25998
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25672
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25673
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25674
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kowalcyyk Rachel
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60182
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25675
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25676
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25677
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26304
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26305
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26306
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25978
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25979
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Riggs Collin
Mailing Address: 713 West Ohio Street
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25980
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fair Adrienne
Mailing Address: 604 East Armory Ave
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25981
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fair Adrienne
Mailing Address: 604 East Armory Ave
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25982
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fair Adrienne
Mailing Address: 604 East Armory Ave
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26307
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fair Adrienne
Mailing Address: 604 East Armory Ave
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26308
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fair Adrienne
Mailing Address: 604 East Armory Ave
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25678
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: E Sichao
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25679
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: E Sichao
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26309
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: E Sichao
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26310
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: E Sichao
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25984
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: E Sichao
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25983
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hua Yanxin
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25985
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hua Yanxin
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25986
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hua Yanxin
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26311
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hua Yanxin
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26312
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hua Yanxin
Mailing Address: 206 East Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25680
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Xuan Danjie
Mailing Address: 1005 West Gregory Drive
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25686
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Xuan Danjie
Mailing Address: 1005 West Gregory Drive
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25687
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Xuan Danjie
Mailing Address: 1005 West Gregory Drive
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25999
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Xuan Danjie
Mailing Address: 1005 West Gregory Drive
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26319
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Xuan Danjie
Mailing Address: 1005 West Gregory Drive
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26320
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stephany Margaret Mary
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26324
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stephany Margaret Mary
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26325
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stephany Margaret Mary
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25688
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stephany Margaret Mary
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26003
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stephany Margaret Mary
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 60305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26004
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sackett Maisie
Mailing Address: 712 Essec Court
City: Glen Ellyn State: IL Zip Code: 60137
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26005
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sackett Maisie
Mailing Address: 712 Essec Court
City: Glen Ellyn State: IL Zip Code: 60137
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25689
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sackett Maisie
Mailing Address: 712 Essec Court
City: Glen Ellyn State: IL Zip Code: 60137
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25690
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sackett Maisie
Mailing Address: 712 Essec Court
City: Glen Ellyn State: IL Zip Code: 60137
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26326
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sackett Maisie
Mailing Address: 712 Essec Court
City: Glen Ellyn State: IL Zip Code: 60137
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26327
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Denton Brad
Mailing Address: 1202 W. Fillmore
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25744
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Denton Brad
Mailing Address: 1202 W. Fillmore
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25745
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Denton Kim
Mailing Address: Rr3 Box 543
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25746
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Denton Kim
Mailing Address: Rr3 Box 543
City: Vandalia State: IL Zip Code: 62471
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25747
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Davenport Judy
Mailing Address: 703 Fourth Street
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25748
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Davenport Judy
Mailing Address: 703 Fourth Street
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25749
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Davenport Judy
Mailing Address: 703 Fourth Street
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25750
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Davenport Judy
Mailing Address: 703 Fourth Street
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26097
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vanhoose Tonda
Mailing Address: 1616 Gretchen
City: Belleville State: IL Zip Code: 62226
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26082
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vanhoose Tonda
Mailing Address: 1616 Gretchen
City: Belleville State: IL Zip Code: 62226
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26083
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vanhoose Tonda
Mailing Address: 1616 Gretchen
City: Belleville State: IL Zip Code: 62226
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25751
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Vanhoose Tonda
Mailing Address: 1616 Gretchen
City: Belleville State: IL Zip Code: 62226
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25752
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heslop Hope
Mailing Address: 125 E. Fairway Dr
City: Belleville State: IL Zip Code: 62223
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25753
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gundlach Dan
Mailing Address: 2918 Indiana Ave
City: Granite City State: IL Zip Code: 62040
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25759
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcconville Kevin
Mailing Address: 60 Wren Drive
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25760
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reis Jill
Mailing Address: 1610 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25767
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Reis Jill
Mailing Address: 1610 Lind St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26105
Date of Disbursement: M M 11 / D D 01 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farha Jr Micheal
Mailing Address: 302 W Adams
City: Macomb State: IL Zip Code: 61455
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25770
Date of Disbursement: M M 10 / D D 31 / Y Y Y Y 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Farha Jr Micheal
Mailing Address: 302 W Adams
City: Macomb State: IL Zip Code: 61455
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25771
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Coons Vicki
Mailing Address: 1308 S 22
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25772
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Coons Vicki
Mailing Address: 1308 S 22
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26400
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Coons Vicki
Mailing Address: 1308 S 22
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26108
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcelwee Perry
Mailing Address: 2392 N 1675th Pl
City: Camp Point State: IL Zip Code: 62320
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25773
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcelwee Lenore
Mailing Address: 2392 N 1675th Pl
City: Camp Point State: IL Zip Code: 62320
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25774
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cocke Justin
Mailing Address: 3414 State Hwy 148
City: Mulkeytown State: IL Zip Code: 62865
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25784
Date of Disbursement: 10 / 31 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Grasso Robert
Mailing Address: 1965 Ravine
City: Gurnee State: IL Zip Code: 60031
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25815
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wittenberg Sharon
Mailing Address: 4163 West End Road
City: Downers Grove State: IL Zip Code: 60515
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25831
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25838
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25840
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25841
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25842
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26181
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26182
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gluek Katie
Mailing Address: 701 University Place
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26183
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gore Elizabeth
Mailing Address: 1871 Orrington
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26187
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gore Elizabeth
Mailing Address: 1871 Orrington
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26188
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gore Elizabeth
Mailing Address: 1871 Orrington
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26189
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gore Elizabeth
Mailing Address: 1871 Orrington
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25839
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wein Dan
Mailing Address: 827 Kimballwood Ln
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25843
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wein Dan
Mailing Address: 827 Kimballwood Ln
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26190
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wein Dan
Mailing Address: 827 Kimballwood Ln
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26191
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wein Dan
Mailing Address: 827 Kimballwood Ln
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26192
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wein Dan
Mailing Address: 827 Kimballwood Ln
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25844
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25852
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25853
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25854
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25855
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26195
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bakir Jamal
Mailing Address: 8202 Millstone
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26196
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Joe
Mailing Address: 19 Terberry
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25858
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Joe
Mailing Address: 19 Terberry
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25859
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Joe
Mailing Address: 19 Terberry
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25860
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Joe
Mailing Address: 19 Terberry
City: Palos Heights State: IL Zip Code: 60463
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25861
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hogan Terry
Mailing Address: 14323 S. Kostner
City: Midlothian State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25862
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hogan Terry
Mailing Address: 14323 S. Kostner
City: Midlothian State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25863
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hogan Terry
Mailing Address: 14323 S. Kostner
City: Midlothian State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25864
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hogan Terry
Mailing Address: 14323 S. Kostner
City: Midlothian State: IL Zip Code: 60445
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25865
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heller Kayla
Mailing Address: 3600 W. 117th Street
City: Chicago State: IL Zip Code: 60655
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25874
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heller Kayla
Mailing Address: 3600 W. 117th Street
City: Chicago State: IL Zip Code: 60655
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25875
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Heller Kayla
Mailing Address: 3600 W. 117th Street
City: Chicago State: IL Zip Code: 60655
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25876
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Filipello Lynda
Mailing Address: 4401 Fender
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25893
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Filipello Lynda
Mailing Address: 4401 Fender
City: Lisle State: IL Zip Code: 60532
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26224
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Leventis Gus
Mailing Address: 18 S Vista
City: Addison State: IL Zip Code: 60101
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25894
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nelson Jody
Mailing Address: 2431 Carlton Dr.
City: Woodridge State: IL Zip Code: 60517
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25895
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nelson Jody
Mailing Address: 2431 Carlton Dr.
City: Woodridge State: IL Zip Code: 60517
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25896
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nelson Jody
Mailing Address: 2431 Carlton Dr.
City: Woodridge State: IL Zip Code: 60517
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25897
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nelson Jody
Mailing Address: 2431 Carlton Dr.
City: Woodridge State: IL Zip Code: 60517
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25898
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nicola Jim
Mailing Address: 613 72nd Court
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E25899
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nicola Jim
Mailing Address: 613 72nd Court
City: Downers Grove State: IL Zip Code: 60516
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25900
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Noble Ben
Mailing Address: 442 N Stone Ave.
City: Lagrange Park State: IL Zip Code: 60526
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25901
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Noble Ben
Mailing Address: 442 N Stone Ave.
City: Lagrange Park State: IL Zip Code: 60526
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25902
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wehr Chris
Mailing Address: 1302 Sumner Street
City: Wheaton State: IL Zip Code: 60189
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25903
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Watt David
Mailing Address: 631 W. Orlando Apt 208
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25904
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Watt David
Mailing Address: 631 W. Orlando Apt 208
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25905
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Watt David
Mailing Address: 631 W. Orlando Apt 208
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26242
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Watt David
Mailing Address: 631 W. Orlando Apt 208
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26243
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sparks Michael
Mailing Address: 588 County Road 2175 E.
City: Secor State: IL Zip Code: 61771
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25907
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sparks Michael
Mailing Address: 588 County Road 2175 E.
City: Secor State: IL Zip Code: 61771
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25908
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik David
Mailing Address: 138 Beaufort
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25909
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sikes Joel
Mailing Address: 1204 N Madison
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25910
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sikes Joel
Mailing Address: 1204 N Madison
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26256
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mcknight Kerry
Mailing Address: 1902 Berrywood Lane
City: Bloomington State: IL Zip Code: 61704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25911
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lindgren Keith
Mailing Address: 1302 Lincoln Road
City: Marquette Heights State: IL Zip Code: 61554
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25912
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubik Dave
Mailing Address: 138 E. Beaufort St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25920
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Strubhar Randy
Mailing Address: 6328 N. 425th East Rd
City: Mclean State: IL Zip Code: 61754
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25923
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Strubhar Linda
Mailing Address: 6328 N. 425th East Road
City: Mclean State: IL Zip Code: 61754
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25924
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kunde Drew
Mailing Address: 2008 Lake Bluff Rd
City: Bloomington State: IL Zip Code: 61704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25925
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kunde Drew
Mailing Address: 2008 Lake Bluff Rd
City: Bloomington State: IL Zip Code: 61704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25926
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kunde Drew
Mailing Address: 2008 Lake Bluff Rd
City: Bloomington State: IL Zip Code: 61704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26239
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kunde Drew
Mailing Address: 2008 Lake Bluff Rd
City: Bloomington State: IL Zip Code: 61704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26240
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Berghouse Alex
Mailing Address: 594 S. Small Ave
City: Kankakee State: IL Zip Code: 60901
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25927
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cross Michael
Mailing Address: 218 Crossing Dr
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25928
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Cross Michael
Mailing Address: 218 Crossing Dr
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26246
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Blair
Mailing Address: 1018 N Maple Wood Ave
City: Peoria State: IL Zip Code: 61605
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26247
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kelly Blair
Mailing Address: 1018 N Maple Wood Ave
City: Peoria State: IL Zip Code: 61605
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25929
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zenn James
Mailing Address: 2610 West Oaktin Street
City: Park Ridge State: IL Zip Code: 60068
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25930
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Zenn James
Mailing Address: 2610 West Oaktin Street
City: Park Ridge State: IL Zip Code: 60068
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25931
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25936
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25937
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25938
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25939
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26265
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26266
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26267
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hamilton Charlotte
Mailing Address: 204 Peabody Drive
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26268
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Liberatore Amanda
Mailing Address: 102 East Green Street, Apt#18
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25940
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Klootwyk Kristen
Mailing Address: 211 East John Street, Apt#208
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26282
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Klootwyk Kristen
Mailing Address: 211 East John Street, Apt#208
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26283
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Klootwyk Kristen
Mailing Address: 211 East John Street, Apt#208
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25952
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Klootwyk Kristen
Mailing Address: 211 East John Street, Apt#208
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25953
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Klootwyk Kristen
Mailing Address: 211 East John Street, Apt#208
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E25954
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bazzanelia Alyssa
Mailing Address: 318 Kensington
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26328
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bazzanelia Alyssa
Mailing Address: 318 Kensington
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26329
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bazzanelia Alyssa
Mailing Address: 318 Kensington
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26006
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bazzanelia Alyssa
Mailing Address: 318 Kensington
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26007
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bazzanelia Alyssa
Mailing Address: 318 Kensington
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26008
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Joseph Jerry
Mailing Address: 509 East Green Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26012
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Joseph Jerry
Mailing Address: 509 East Green Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26013
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Joseph Jerry
Mailing Address: 509 East Green Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26332
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Joseph Jerry
Mailing Address: 509 East Green Street
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26333
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaily Katherine
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26015
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaily Katherine
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26016
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaily Katherine
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26017
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaily Katherine
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26018
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaily Katherine
Mailing Address: 508 East Chalmers
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26019
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Enriquez Pamela
Mailing Address: 2245 Iroquis Road
City: Champaign State: IL Zip Code: 60091
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26020
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Enriquez Pamela
Mailing Address: 2245 Iroquis Road
City: Champaign State: IL Zip Code: 60091
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26021
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Enriquez Pamela
Mailing Address: 2245 Iroquis Road
City: Champaign State: IL Zip Code: 60091
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26022
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bauer Chris
Mailing Address: 2160 Vachel Lindsay Dr
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26037
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Nettels Latrine
Mailing Address: 1536 Sven Pines Rd
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26038
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sneed Mary
Mailing Address: 3205 Saxony Rd
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26041
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sneed Mary
Mailing Address: 3205 Saxony Rd
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26042
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sneed Mary
Mailing Address: 3205 Saxony Rd
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26043
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sneed Mary
Mailing Address: 3205 Saxony Rd
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26044
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Sneed Mary
Mailing Address: 3205 Saxony Rd
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26348
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Joan
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26355
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Joan
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26356
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Joan
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26051
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Joan
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26052
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Egiizi Joan
Mailing Address: 2823 Dryden
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26053
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boyd Dave
Mailing Address: 2230 Lindbergh
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26055
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boyd Dave
Mailing Address: 2230 Lindbergh
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26056
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boyd Dave
Mailing Address: 2230 Lindbergh
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26057
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boyd Dave
Mailing Address: 2230 Lindbergh
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26357
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Boyd Dave
Mailing Address: 2230 Lindbergh
City: Springfield, State: IL Zip Code: 62704
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26358
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Spitz Anne
Mailing Address: 13552 Niggli Rd
City: Pocahontas State: IL Zip Code: 62275
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26072
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Meikamp Jo
Mailing Address: 1370 Geiber Rd
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26073
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Doncarlos Sue
Mailing Address: 2406 Patrick Drive
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26074
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hurt Jim
Mailing Address: 2922 Woodland Ln
City: Marine State: IL Zip Code: 62061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26076
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hurt Jim
Mailing Address: 2922 Woodland Ln
City: Marine State: IL Zip Code: 62061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26077
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Hurt Jim
Mailing Address: 2922 Woodland Ln
City: Marine State: IL Zip Code: 62061
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26385
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kuehl Amy
Mailing Address: 1415 Lynn St.
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26078
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kuehl Amy
Mailing Address: 1415 Lynn St.
City: Highland State: IL Zip Code: 62249
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26079
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Denhe Ruth
Mailing Address: 8 Cherrywood Ct
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26084
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Fuerguson Wendy
Mailing Address: 464 Hamilton
City: Woodriver State: IL Zip Code: 62095
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26085
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jones Donna
Mailing Address: 4010 Vesei
City: Granite City State: IL Zip Code: 62040
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26086
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Killion Sally
Mailing Address: 5 Doug Dr
City: St.jacob State: IL Zip Code: 62281
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26089
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Whimmer Kathy
Mailing Address: 300 Paddock Rd
City: Belleville State: IL Zip Code: 62223
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26091
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

0.00

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buehler Adam
Mailing Address: 315 Las Olas
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26096
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Buehler Adam
Mailing Address: 315 Las Olas
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26381
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer Charlotte
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26401
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer Charlotte
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26402
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer Charlotte
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26109
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer Charlotte
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26110
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer John
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26111
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer John
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26112
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer John
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26403
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Tourneer John
Mailing Address: 2065 College
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26404
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bland James
Mailing Address: 832 N 2800 Th Ave
City: Mendon | State: IL | Zip Code: 62351
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26113
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Bland Marian
Mailing Address: 832 N 2800th Ave
City: Mendon | State: IL | Zip Code: 62351
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26114
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Blickhan Steve
Mailing Address: 7004 White Oak Rd
City: Quincy | State: IL | Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26115
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Geise Sharon
Mailing Address: 3222 Center Dr
City: Quincy | State: IL | Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26116
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Goodwin Susan
Mailing Address: 3820 S 24th
City: Quincy | State: IL | Zip Code: 62305
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26117
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Maloy April
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26139
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Maloy April
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26140
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Maloy April
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26165
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Maloy April
Mailing Address: 1101 N Madison
City: Marion State: IL Zip Code: 62959
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26166
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Melfi Laura
Mailing Address: Po Box 423
City: Cambria State: IL Zip Code: 62915
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26141
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) [ ] 4a [ ] 4b [ ] 4c [ ] 4d [x] 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Courtney
Mailing Address: 329 E Gaskins St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26151
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Courtney
Mailing Address: 329 E Gaskins St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26152
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Courtney
Mailing Address: 329 E Gaskins St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26153
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Smith Courtney
Mailing Address: 329 E Gaskins St
City: Harrisburg State: IL Zip Code: 62946
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26154
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Wojciechowski Daniel
Mailing Address: Po Box 684
City: Cambria State: IL Zip Code: 62915
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26159
Date of Disbursement: 11 / 01 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Krueger Mary Ann
Mailing Address: 22 Courleroux
City: Palos Hills State: IL Zip Code: 60465
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26203
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Veenstra Richard
Mailing Address: 201 N Catalpa
City: Addison State: IL Zip Code: 60101
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26225
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26227
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26228
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26229
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26230
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26231
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26232
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Soch Ray
Mailing Address: 2132 Ruby St.
City: Melrose Park State: IL Zip Code: 60164
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26233
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Gaeta Jon
Mailing Address: 118 Monroe
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26234
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Metroff Victor
Mailing Address: 804 S. 7th Ave
City: Lagrange State: IL Zip Code: 60525
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26236
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Morris Jordan
Mailing Address: 2403 Peppertree Place
City: Champaign State: IL Zip Code: 61822
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26237
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Lastres Caitlin
Mailing Address: 1003 N School St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26238
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Stott Ramo
Mailing Address: 117 W. Willow Apt 1
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26241
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Mattheessen John
Mailing Address: 2007 Desoto Ct
City: Pekin State: IL Zip Code: 61554
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26244
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubic Andrew
Mailing Address: 138 E Beaufort St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26245
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Anderson Adrienne
Mailing Address: 705 S. Franklin Apt 3
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26252
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Kubic Dave
Mailing Address: 138 E. Beaufort St
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26257
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Jeffries Gina
Mailing Address: 108 Nicholas Rd
City: Groveland State: IL Zip Code: 61535
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26258
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Call Lindsay
Mailing Address: 602 Hillview Dr Apt 5
City: Normal State: IL Zip Code: 61761
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26259
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **0.00**

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.
Full Name (Last, First, Middle Initial) / Full Organization Name: Musolino Jim
Mailing Address: 1225 S 18th St
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26405
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial) / Full Organization Name: Dooley Cheryl
Mailing Address: 426 Pinehurst Dr
City: Quincy State: IL Zip Code: 62301
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26406
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Daniel
Mailing Address: P.o. Box 81
City: Buffalo State: IL Zip Code: 62515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26407
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

D.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Daniel
Mailing Address: P.o. Box 81
City: Buffalo State: IL Zip Code: 62515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26408
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

E.
Full Name (Last, First, Middle Initial) / Full Organization Name: Miller Daniel
Mailing Address: P.o. Box 81
City: Buffalo State: IL Zip Code: 62515
Purpose of Disbursement: Memo: Generic Gotv Incent Gift Card
Transaction ID: 4B10317.E26409
Date of Disbursement: 11 / 02 / 2010
Amount of Each Disbursement this Period: 20.00
Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one)
☐ 4a ☐ 4b ☐ 4c ☐ 4d ☒ 5

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial) / Full Organization Name
Postle Bernadette

Mailing Address 928 N 230th Ave

City: Quincy
State: IL
Zip Code: 62305

Purpose of Disbursement
Memo: Generic Gotv Incent Gift Card

Transaction ID: 4B10317.E26410

Date of Disbursement
MM 11 / DD 02 / YYYY 2010

Amount of Each Disbursement this Period
20.00

Account: LEVIN
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**0.00**
TOTAL This Period (last page this line number only) ..... ▶	**54566.76**