FEC FORM 3X	AN	PORT (ID DISB Other Than	URSEN	IENTS	tee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		xample:If typin ver the lines	g, type			
DuPage Medical G	roup LTD PAC							<u></u>
ADDRESS (number and	street)	100 West 31ST 3						
Check if differ	ent L	uite 300						
than previously reported. (ACC		owners Grove					60515	-
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		:	STATE	ZIPCOI	DE 🔺
C00435982			3. IS THIS REPOR	т	NEW (N) OR	X AI (A	MENDED)	
 4. TYPE OF REPO (Choose One) (a) Quarterly Repo April 15 Quarterly 		(b) Monthly Report Due On:	Feb 20 (M Mar 20 (M Apr 20 (M	3) 4)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
October Quarterly January 3	Report(Q3)	(c) 12-Day PRE-Ele Report f		Primary (12 Convention		General Special (Runoff (12R)
Year Only	on-election	(d) 30-Day Post -E Report f		General (30		Runoff (30R)	Special (30S)
		 	Election on	11	02	2010	State o	f
5. Covering Period	10	14 2	010	through	11	22	2010	
I certify that I have exam	ined this Repor	t and to the best	of my knowledge	e and belief it i	s true, correct	and complete.		
Type or Print Name of T	reasurer <u>I</u>	Mary Goldsher						
Signature of Treasurer	Electronically	/ Filed by Mary	Goldsher		D	Pate 12	09	2010
NOTE : Submission of f	alse, erroneous	, or incomplete ir	formation may s	subject the per	son signing thi	s Report to the	e penalties of 2 U.S	3.C 437g.
Office Use Only							FEC FOR (Rev. 12/200	

A. Form/Schedule : F3X

Transaction ID :

Image# 10932101163

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

3 / 53

FEC Form 3X (Rev. 02/20	03) OF RECEIPTS AND DISBORSEMENTS	3 / 53
Write or Type Committee Name DuPage Medical Group LTI) PAC	
Report Covering the Period:	From:	To:
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2010	Y Y Y	40637.58
(b) Cash on Hand at Begining of Reporting Period	59057.74	
(c) Total Receipts (from Line 19)	31225.70
 (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 		71863.28
7. Total Disbursements (from Line 3	1) 16000.00	22250.00
 Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) 		49613.28
 Debts and Obligations owed the committee (Itemize all on 		
Schedule C and/or Schedule D)		
 Debts and Obligations owed B' the committee (Itemize all on Schedule C and/or Schedule D) 	0.00	

X 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

Image#	10932101164
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DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)		4 / 53
Write or Type Committee Name DuPage Medical Group LTD PAC		
Report Covering the Period: From:	^d 14 Y Y Y Y Y 14	To:
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	5640.85	21195.88
(ii) Unitemized	914.69	10029.82
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	6555.54	31225.70
(b) Political Party Committees	0.00	0.00
 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6555.54	31225.70
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6555.54	31225.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6555.54	31225.70

Image# 10932101165

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	of Disbursements	5 / 5		
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
 Operating Expenditures: (a) Shared Federal/Non-Federal 				
Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	0.00	30.00		
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) 	0.00	30.00		
2. Transfers to Affiliated/Other Party Committees	0.00	0.00		
3. Contributions to Federal Candidates/Committees and Other Political Committees	4000.00	10200.00		
4. Independent Expenditure (use Schedule E)	0.00	0.00		
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
7. Loans Made	0.00	0.00		
 8. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees (b) Than Political Committees 	0.00	20.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	20.00		
9. Other Disbursements	12000.00	12000.00		
 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	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
1. Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16000.00	22250.00		
2. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	16000.00	22250.00		

DETAILED SUMMARY PAGE

of Disbursements

6 / 53

	FEC Form 3X (Rev. 02/2003)		6 / 53
	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)	6555.54	31225.70
34.	Total Contribution Refunds (from Line 28(d))	0.00	20.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	6555.54	31205.70
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	30.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	30.00

SCHEDULE A (FEC Form		FOR LINE NUMBER: PAGE 7 / 53 (check only one)							
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page								
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may not be sold or used by any pers using the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)									
DuPage Medical Group LTD P	AC								
Full Name (Last, First, Middle Initial) Craig Anderson		Date of Receipt							
Mailing Address 3 Briar Ln		10 ¹ 15 ² 2010							
City	State Zip Code	Transaction ID: B8038E24A1F8437BD							
West Chicago	IL 60185-3033	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	20.84							
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician								
Receipt For:	Aggregate Year-to-Date V	—							
Primary General	479.32								
Other (specify)									
Full Name (Last, First, Middle Initial) Craig Anderson		Date of Receipt							
Mailing Address 3 Briar Ln		1 1 0 2 2 0 1 0							
City	State Zip Code	Transaction ID: A430CC498AD8E0202							
West Chicago	IL 60185-3033	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	20.84							
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician								
Receipt For:	Aggregate Year-to-Date ▼								
Other (specify)	479.32								
Full Name (Last, First, Middle Initial) Craig Anderson		Date of Receipt							
Mailing Address 3 Briar Ln		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
City	State Zip Code	Transaction ID: 34ED84CECB4023EF							
West Chicago	IL 60185-3033	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	20.84							
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician								
Receipt For:	Aggregate Year-to-Date ▼								
Other (specify)	479.32								
SUBTOTAL of Receipts This Page (or	l ptional)	62.52							
TOTAL This Period (last page this line	number only)	•							

C												
	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 / 53								
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)								
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	NAME OF COMMITTEE (In Full)				noutions	non	1 500	100				
	DuPage Medical Group LTD PAC											
	/ Durage Medical Gloup LTD FAC											
~	Full Name (Last, First, Middle Initial)			_								
	James Collins				of Recei	•						
	Mailing Address 1673 Imperial Cir			11	M / I	0		Y		010		
	City	State	Zip Code	Trans	action I	D: 3	27D	0BA	AA7	61D	7AC	CBE
	Naperville	IL	60563-0132		unt of Ea							
	FEC ID number of contributing					_						
	federal political committee.	C							3	9.00	<u> </u>	
	Name of Employer	Occupation		-								
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:		'ear-to-Date ▼	1								
	Primary General											
	Other (specify) 🔻		273.00									
_												
	Full Name (Last, First, Middle Initial) James Collins			Date	of Recei	nt						
•	Mailing Address 1673 Imperial Cir			M		pr D) /	Y	Y	Y	Y	
				11		1				0 1 0		
	City	State	Zip Code	Trans	action I	D: 5	B3A	30E	2F	FC0	D34	EΒ
	Naperville	IL	60563-0132	Amo	unt of Ea	ch F	leceip	t thi	s Pe	eriod		
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	federal political committee.							_				_
	Name of Employer DuPage Medical Group, Ltd.	Occupation										
	DuPade Medical Group 1 td											
		Physician										
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	Receipt For:		Year-to-Date ▼ 273.00									
_	Receipt For: Primary General Other (specify) ▼											
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly			Date	of Recei	pt						
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-	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrew City Orland Park FEC ID number of contributing federal political committee.	Aggregate Y Aggregate Y /s Dr State IL C	273.00 Zip Code	1 0 Trans	M /	1 1 D: E	5 36E0	СВ	2 D25 s Pe	01(81B eriod) 354	.C0
-	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrew City Orland Park FEC ID number of contributing	Aggregate Y Aggregate Y 's Dr State IL C Occupation	273.00 Zip Code	1 0 Trans	M /	1 1 D: E	5 36E0	СВ	2 D25 s Pe	01(81B eriod) 354	. <u>CO</u>
-	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrew City Orland Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	Aggregate Y Aggregate Y /s Dr State IL C Occupation Physician	273.00 Zip Code 60462-4165	1 0 Trans	M /	1 1 D: E	5 36E0	СВ	2 D25 s Pe	01(81B eriod) 354	. <u>CO</u>
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-	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrew City Orland Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	Aggregate Y Aggregate Y /s Dr State IL C Occupation Physician	273.00 Zip Code 60462-4165	1 0 Trans	M /	1 1 D: E	5 36E0	СВ	2 D25 s Pe	01(81B eriod) 354	
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Γ	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrew City Orland Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	Aggregate Y Aggregate Y IL C Occupation Physician Aggregate Y	273.00 Zip Code 60462-4165 //ear-to-Date ▼ 460.00	1 0 Trans	M /	1 1 D: E	5 36E0	СВ	2 D25 s Pe 2	01(81B eriod) 354	

I	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 53 (check only one) 11a X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using t NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)			
Α.	Mary Connolly Mailing Address 15242 Saint Andrew	s Dr		Date of Receipt
	City	State	Zip Code	Transaction ID: E8E3B4BA4E6148F9AE1
	Orland Park	IL	60462-4165	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	460.00]
В.	Full Name (Last, First, Middle Initial) Mary Connolly			Date of Receipt
	Mailing Address 15242 Saint Andrew	s Dr		1 1 1 5 2 0 1 0
	City	State	Zip Code	Transaction ID: CCF0DDE1C0B89EDD2A
	Orland Park	IL.	60462-4165	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 460.00]
– C.	Full Name (Last, First, Middle Initial) David Dungan			Date of Receipt
	Mailing Address 211 Palamino Pl			M M / D D / Y Y Y Y 10 15 2010
	City Wheaton	State II	Zip Code 60189-2046	Transaction ID: 140ED27ECDBB5AA1BC Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar		-
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Γ	SUBTOTAL of Receipts This Page (optional)			60.00

S	CHEDULE A (FEC Form 3X)		Lleo coparato cohodulo(c)	FOR LINE NUMBER: PAGE 10 / 53 (check only one)	
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-			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	
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	NAME OF COMMITTEE (In Full)				
	DuPage Medical Group LTD PAC				
Ľ	Full Name (Last, First, Middle Initial) David Dungan			Date of Receipt	
	Mailing Address 211 Palamino Pl			M M / D D / Y Y Y Y 111 02 2010	
	City	State	Zip Code	Transaction ID: F05D0E01047EC373	
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_	Full Name (Last, First, Middle Initial) David Dungan	<u> </u>		Date of Receipt	
	Mailing Address 211 Palamino Pl			M M / D D / Y Y Y Y 111 15 2010	
	City	State	Zip Code	Transaction ID: 56B88007448605515	
	Wheaton	IL	60189-2046	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		20.00	
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 460.00		
_	Full Name (Last, First, Middle Initial) Thomas Gallagher			Date of Receipt	
	Mailing Address 1105 Adelia St			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City	State	Zip Code	Transaction ID: 55A2EBB14AC19006	
	Downers Grove	IL	60516-2830	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 626.91]	
Γ	SUBTOTAL of Receipts This Page (optional)			90.00	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		OR LINE			R: [PAG	E 1	1 / 53		
	ITEMIZED RECEIPTS	FD RECEIPTS for each category of the			(check only one)								
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	NAME OF COMMITTEE (In Full)												
	DuPage Medical Group LTD PAC												
Α.	Full Name (Last, First, Middle Initial) Thomas Gallagher				Date o	f Re	ceipt						
	Mailing Address 1105 Adelia St				м м 11	/		^D /2	Y		0 ^Y 10		
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В.	Full Name (Last, First, Middle Initial) Thomas Gallagher				Date o	f Re	ceipt						
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С.	Full Name (Last, First, Middle Initial) Martin Gallo				Date o	f Ro	ceint						
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	Clarendon Hills		60514-1466		Amour	nt of	Each	Rece	pt this	s Pe	eriod		
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	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/53 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	angle DuPage Medical Group LTD PAC		
	Full Name (Last, First, Middle Initial) Martin Gallo		Date of Receipt
	Mailing Address 118 Allen Ct		M M / D D / Y
	City	State Zip Code	Transaction ID: 16AE36D413BDB49DB6
	<u>Clarendon Hills</u>	IL 60514-1466	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	PrimaryGeneralOther (specify)Image: Contract of the second sec	273.00]
	Full Name (Last, First, Middle Initial) John Giardina		Date of Receipt
	Mailing Address 832 Abbey Dr		M M / D D / Y Y Y Y 10 15 2010
	City	State Zip Code	Transaction ID: 6434B45B7C1F7D6C30
	Glen Ellyn	IL 60137-6130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 384.60]
	Full Name (Last, First, Middle Initial) John Giardina	I	Date of Receipt
	Mailing Address 832 Abbey Dr		M M / D D / Y Y Y Y 11 02 2010
	City	State Zip Code	Transaction ID: 92C32FD1D735AA2220
	<u>Glen Ellyn</u>	IL 60137-6130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60]
Γ	SUBTOTAL of Receipts This Page (optional).		115.92

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 53 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person a name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr		Date of Receipt
			11 15 2010
	City	State Zip Code	Transaction ID: 88086E590A56271C4F3
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	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	
- В.	Full Name (Last, First, Middle Initial) Mary Goldsher Mailing Address 536 Mayfair Ln		Date of Receipt
			10 15 2010
	City Naperville	State Zip Code IL 60565-5387	Transaction ID: 24A4709786167C5647E Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Chief Operating Officer Primary Care	_
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 460.00	
- C.	Full Name (Last, First, Middle Initial) Mary Goldsher		Date of Receipt
	Mailing Address 536 Mayfair Ln		1 1 / 0 2 / Y Y Y 2 0 1 0
	City	State Zip Code	Transaction ID: E1714C86113AF7DA7B
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	Name of Employer DuPage Medical Group, Ltd.	Occupation Chief Operating Officer Primary Care	
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Z A.	Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct		Date of Receipt
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	City	State Zip Code	Transaction ID: F28B5EA4D24FE5BFB5
	Palos Hills FEC ID number of contributing federal political committee.	IL 60465-2200	Amount of Each Receipt this Period 100.00
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	Full Name (Last, First, Middle Initial) Naira Hashmi		Date of Receipt
	Mailing Address 640 S Washington St Ste 268		10 ^M 15 ^J 2010
	City	State Zip Code	Transaction ID: 609424C6D888A32F250
	Naperville FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
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в.	Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr			Date of Receipt
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	<u>Chicago</u>	IL	60610-6539	Amount of Each Receipt this Period
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—).	Full Name (Last, First, Middle Initial) Robert Janowitz			Date of Receipt
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	NAME OF COMMITTEE (In Full)		
	DuPage Medical Group LTD PAC		
A.	Full Name (Last, First, Middle Initial) Richard Krouse		Date of Receipt
	Mailing Address 4720 Lee Ave		M M / D D / Y Y Y Y 111 15 2010
	City	State Zip Code	Transaction ID: 0455E7E64DBD46B039
	Downers Grove	IL 60515-3319	Amount of Each Receipt this Period
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	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	460.00	
- B.	Full Name (Last, First, Middle Initial) David Labotka		Date of Receipt
	Mailing Address 1312 S Ridge Rd		M M / D D / Y Y Y Y 10 15 2010
	City	State Zip Code	Transaction ID: 152EEC22554FACB043
	Willowbrook	IL 60527-1896	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
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	Primary General Other (specify)	479.09	
- C.	Full Name (Last, First, Middle Initial) David Labotka		Date of Receipt
	Mailing Address 1312 S Ridge Rd		M M / D D / Y Y Y Y 111 02 2010
	City	State Zip Code	Transaction ID: 2D78D65D7EC73E0A88
	Willowbrook	IL 60527-1896	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	479.09	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 23/53
	· · · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any per dress of any political committee	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.
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	> DuPage Medical Group LTD PAC			
Α.	Full Name (Last, First, Middle Initial) David Labotka			Date of Receipt
	Mailing Address 1312 S Ridge Rd			M M / D D / Y Y Y Y Y 11 1 15 2010
	City	State	Zip Code	Transaction ID: 1DD6F3B891AAFF6AC
	Willowbrook	IL	60527-1896	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	479.09	
в.	Full Name (Last, First, Middle Initial) Todd Lavigne			Date of Receipt
	Mailing Address 2034 W Walton St			M · M / D · D / Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y Y · Y · Y · Y · Y Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y Y · Y · Y · Y · Y · Y · Y · Y · Y · Y ·
	City	State	Zip Code	Transaction ID: 911F33F155AAD412B5
	Chicago	IL	60622-4960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Senior D	ⁿ irector of IT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		920.00	
C.	Full Name (Last, First, Middle Initial) Todd Lavigne	I		Date of Receipt
	Mailing Address 2034 W Walton St			M M / D D / Y Y Y Y Y 111 02 2010
	City	State	Zip Code	Transaction ID: 1EBB04D6FB18E0881
	Chicago	IL	60622-4960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Senior D	n irector of IT	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		920.00	
	SUBTOTAL of Receipts This Page (optional)	I		100.83
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 24 / 53							
			Use separate schedule(s) for each category of the	(check only one)						
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	l Name (Last, First, Middle Initial) Id Lavigne			Date of Receipt						
Mai	ling Address 2034 W Walton St			M M / D D / Y Y Y Y 111 15 2010						
City	/	State	Zip Code	Transaction ID: 03C9300D610CD	F52F					
<u>Ch</u>	icago	IL	60622-4960	Amount of Each Receipt this Period						
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	Primary General									
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	l Name (Last, First, Middle Initial) on Lazar			Date of Receipt						
Mai	ling Address 1564 Abbotsford Dr			10 ^{//} 15 [/] 2010						
City	/	State	Zip Code	Transaction ID: 1A20AB399FB509	9703					
<u>Na</u>	perville	IL	60563-2088	Amount of Each Receipt this Period						
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Mai	ling Address 1564 Abbotsford Dr			M M / D D / Y Y Y Y 111 02 2010						
City	/	State	Zip Code	Transaction ID: D1C92DC9A050B	37FD					
<u>Na</u>	perville	IL	60563-2088	Amount of Each Receipt this Period						
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	Primary General		500.00							
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	CHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 53 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements mathe name and add	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	> DuPage Medical Group LTD PAC			
,	Full Name (Last, First, Middle Initial) Aaron Lazar			Date of Receipt
	Mailing Address 1564 Abbotsford Dr			M M / D D / Y Y Y Y 111152010
	City	State	Zip Code	Transaction ID: 97F7B390B484468CA
	Naperville	IL	60563-2088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	500.00	
	Full Name (Last, First, Middle Initial) Steve Lieberman	I		Date of Receipt
	Mailing Address 819 E Hillside Rd			M M / D D / Y Y Y Y 10 15 2010
	City	State	Zip Code	Transaction ID: 359B5173D09777001
	Naperville		60540-6806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 483.00	
	Full Name (Last, First, Middle Initial) Steve Lieberman			Date of Receipt
	Mailing Address 819 E Hillside Rd			M M / D D / Y Y Y Y 1 1 0 2 2 0 1 0
	City	State	Zip Code	Transaction ID: 9CFDE53FDFE8C5BE
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	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial		
	Receipt For: Primary General Other (specify) v		e Year-to-Date ▼ 483.00	
	SUBTOTAL of Receipts This Page (optional	I		67.00

	SCHEDULE A (FEC Form 3X)				FOR LINE N	IUMBER:	PAGE	26 / 5	3
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Α.	Full Name (Last, First, Middle Initial) Steve Lieberman				Date of F	Receipt			
	Mailing Address 819 E Hillside Rd				м м 11	/ D D 15		² 0 1 (
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	Primary General			400.00					
	Other (specify)	0 0		483.00					
В.	Full Name (Last, First, Middle Initial) Alicia Martin				Date of F	Receipt			
	Mailing Address 235 W Van Buren St Unit 1711				м м 10	/ D D 15		y y 2010	
	City	State	Zip Code		Transact	ion ID: 9	A7626C0)5C18F	F0249A
	Chicago	IL	60607-3932		Amount of	of Each R	eceipt this	Period	
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	Primary General			230.00					
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C.	Full Name (Last, First, Middle Initial) Alicia Martin				Date of F	Receipt			
	Mailing Address 235 W Van Buren St Unit 1711				M M 1 1	/ D D 02		ү 201(
	City	State	Zip Code		Transact	ion ID: 1	0E55645	2B996	3CE165
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9	SCHEDULE A (FEC Form 3X	Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 53
	TEMIZED RECEIPTS	for each category of the	(check only one)
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	Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any per he name and address of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
	DuPage Medical Group LTD PAC		
∠ A.	Full Name (Last, First, Middle Initial) Alicia Martin		Date of Receipt
	Mailing Address 235 W Van Buren St Unit 1711	t	M M / D D / Y
	City	State Zip Code	Transaction ID: 08723B5DDC0878227B
	Chicago	IL 60607-3932	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	230.00	
– B.	Full Name (Last, First, Middle Initial) Nicholas Mataragas		Date of Receipt
	Mailing Address 6105 Timber Ridge (Ct	10 ^{//} 15 [/] 2010
	City	State Zip Code	Transaction ID: 111A0BEC7F6748D186
	Indian Head Park	IL 60525-3759	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.23
	Name of Employer DuPage Medical Group, Ltd.	Occupation Surgeon	
	Receipt For: Primary General Other (specify) •	Aggregate Year-to-Date ▼ 442.29	
- C.	Full Name (Last, First, Middle Initial) Nicholas Mataragas		Date of Receipt
0.	Mailing Address 6105 Timber Ridge (Ct	
	City Indian Head Park	State Zip Code IL 60525-3759	Transaction ID: E86AC00A26DA6032C4
	FEC ID number of contributing federal political committee.		19.23
	Name of Employer DuPage Medical Group, Ltd.	Occupation Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 53											
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C	r for commercial purposes, other than using the	e name and add	dress of any political committee to	o solicit contributions from such committee.											
	NAME OF COMMITTEE (In Full)														
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~	Full Name (Last, First, Middle Initial) Nicholas Mataragas			Date of Receipt											
	Mailing Address 6105 Timber Ridge Ct			M M / D D / Y Y Y Y 111 15 2010											
	City	State	Zip Code	Transaction ID: 3A73A665DBAF757											
	Indian Head Park	IL	60525-3759	Amount of Each Receipt this Period											
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	Name of Employer DuPage Medical Group, Ltd.	Occupatio Surgeon	n												
	Receipt For:	, I – Ŭ – Ŭ	e Year-to-Date 🔻												
	Primary General Other (specify) ▼		442.29												
_	Full Name (Last, First, Middle Initial)														
	Paul Merrick Mailing Address 540 Hill Ave			Date of Receipt											
				10 15 2010											
	City	State	Zip Code	Transaction ID: 25D012A34855EA14											
	Glen Ellyn	IL	60137-5032	Amount of Each Receipt this Period											
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	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial													
	Receipt For:	Aggregate	e Year-to-Date 🔻												
	Other (specify)	0 0	460.00												
	Full Name (Last, First, Middle Initial) Paul Merrick			Date of Receipt											
	Mailing Address 540 Hill Ave			M M / D D / Y Y Y Y 1 1 02 2010											
	City	State	Zip Code	Transaction ID: DEF0BFFF91E7AC9											
	Glen Ellyn	IL	60137-5032	Amount of Each Receipt this Period											
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	DuPage Medical Group LTD PAC										
A.	Full Name (Last, First, Middle Initial) Paul Merrick				Date of	f Rece	eipt				
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	Mailing Address 1801 S Highland Ave				м м 10	/	^D 1	5 / Y		0 ^Y 1	
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- C.	Full Name (Last, First, Middle Initial) M. Paul Meyer				Date of	f Roce	aint				
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k	NAME OF COMMITTEE (In Full)									
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	Mailing Address 1801 S Highland Ave				м 1		15		201	
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-	Keith Monson			Da	te of F	Receipt				
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	Other (specify)		1035.00	4									
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	Receipt For:	Surgeon											
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×	Full Name (Last, First, Middle Initial) Keith Monson			Da	e of	Rec	reint						
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Γ	NAME OF COMMITTEE (In Full)												
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9	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 / 53											
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	NAME OF COMMITTEE (In Full)	ie name and add	bress of any political committee to												
	DuPage Medical Group LTD PAC														
لا A.	Full Name (Last, First, Middle Initial) Mark Nelson			Date of Receipt											
	Mailing Address 3753 King Williams C	Ct		M M / D D / Y Y Y Y 1 1 1 15 2010											
	City	State	Zip Code	Transaction ID: 45B863311ACCCAD27											
	Saint Charles	IL	60174-7806	Amount of Each Receipt this Period											
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	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial													
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	Primary General Other (specify) ▼		460.00]											
– B.	Full Name (Last, First, Middle Initial) Ravi Nemivant			Date of Receipt											
	Mailing Address 561 Hevern Dr			M M / D D / Y Y Y Y 10 15 2010											
	City	State	Zip Code	Transaction ID: 3A193B03241AFC3573											
	Wheaton	IL	60189-7396	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C		25.00											
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia													
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 575.00]											
- C.	Full Name (Last, First, Middle Initial) Ravi Nemivant			Date of Receipt											
	Mailing Address 561 Hevern Dr			M M / D D / Y Y Y Y 11 02 2010											
	City	State	Zip Code	Transaction ID: 747E38D22908AD6A1E											
	Wheaton	IL	60189-7396	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C		25.00											
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial													
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 575.00												
Γ	SUBTOTAL of Receipts This Page (optional)			70.00											

ļ	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	-	LINE N	-	R: F	PAGE	33 / 5	3
			for each category of the	ì	k only o	ne) 11b	[] 11		1 12	
			Detailed Summary Page		13	14	H 15		16	1 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	/ not be sold or used by any perso	on for the	e purpos	se of so	oliciting	contril	butions	;
	NAME OF COMMITTEE (In Full)	e name anu auc			Untribut		SITI SUCI	COIII	millee.	
	DuPage Medical Group LTD PAC									
۷ A.	Full Name (Last, First, Middle Initial) Ravi Nemivant			D	ate of R	eceipt				
	Mailing Address 561 Hevern Dr				мм, 11		^D / 5		2 0 1	
	City	State	Zip Code	Tr	ansacti	on ID:	D409I	E418	9D1C	F949B6/
	Wheaton	IL	60189-7396	A	mount o	f Each	Receip	t this I	Period	
	FEC ID number of contributing federal political committee.	C							25.0)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For:		Year-to-Date V							
	Primary General		575.00	1						
	Other (specify)	0 0								
В.	Full Name (Last, First, Middle Initial) Don Nichols			D	ate of R	eceipt				
	Mailing Address 515 W Park Ave				м м 10		^D / 5		201	
	City	State	Zip Code	Tr	ansacti	on ID:	AF880	09BC	EB8E	307A547
	Wheaton	IL	60189-6354	A	mount o	f Each	Receip	t this I	Period	
	FEC ID number of contributing federal political committee.	C				1			20.0)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For:	Aggregate	Year-to-Date 🔻							
	 Primary Other (specify) ▼ 	0 0	460.00							
-	Full Name (Last, First, Middle Initial)									
C.	Don Nichols Mailing Address 515 W Park Ave				ate of R		D /	YY	Y	Y
					11	C	2	2	201	0
	City Wheaton	State IL	Zip Code 60189-6354							A2B8584
			60189-6354		mount o	r Each	Receip	t this i	1 1	
	FEC ID number of contributing federal political committee.	C							20.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For:	1 1	Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	460.00							
Г									65.0	n
Ļ	SUBTOTAL of Receipts This Page (optional)								55.0	
	TOTAL This Period (last page this line number	r only)		L						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 53 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Don Nichols Mailing Address 515 W Park Ave		Date of Receipt
	City Wheaton	State Zip Code IL 60189-6354	1 1 5 2 0 1 Transaction ID: 7A3E029271666E5E16F Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 460.00	
- B.	Full Name (Last, First, Middle Initial) Brian O'Leary Mailing Address 401 59th St		Date of Receipt
	City	State Zip Code	Transaction ID: D016AA89B8D7BE354F6
	Downers Grove	IL 60516-1440	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	21.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 483.00	
- C.	Full Name (Last, First, Middle Initial) Brian O'Leary		Date of Receipt
	Mailing Address 401 59th St		M M / D D / Y Y Y Y 1 1 0 2 2010
	City Downers Grove	State Zip Code IL 60516-1440	Transaction ID: 32ACB1182FE39297DE5
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 483.00	
	SUBTOTAL of Receipts This Page (optional)		62.00
ľ	TOTAL This Period (last page this line number	only)	

6	CHEDIII E A (EEC Form 2V)			F	OR LINE	NU	MRE		PAC	GE :	35 / 5	3
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		check only							<u> </u>
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a		11b		11c		12	
_					13		14		15		16	17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any per dress of any political committee	rson fo to soli	r the purp cit contrib	oose outio	e of so Ins fro	licitir m su	ig co ich c	ntrib omm	utions nittee.	
	NAME OF COMMITTEE (In Full)											
	DuPage Medical Group LTD PAC											
<i>ب</i> ٩.	Full Name (Last, First, Middle Initial) Brian O'Leary				Date of	Re	ceipt					
	Mailing Address 401 59th St				^M 1 1	/		^D 5	Y		0 ^Y 1 (
	City	State	Zip Code		Transa	ctio	n ID:	55D	968	9C7	CB5	934FA
	Downers Grove	IL	60516-1440		Amoun	t of	Each	Rece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C					1				21.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia										
	Receipt For:		e Year-to-Date 🔻									
	Primary General											
	Other (specify)		483.00									
- 3.	Full Name (Last, First, Middle Initial) James Oakley				Date of	Re	ceipt					
	Mailing Address 605 S Grant St				м м 1 0	/		D /	Y		0 ^Y 1 (
	City	State	Zip Code		Transa	ctio	n ID:	94B	062	467	408F	12900
	Hinsdale	IL	60521-4453		Amoun	t of	Each	Rece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C								2	25.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia	n n/Radiologist									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General Other (specify) ▼	0 0	575.00									
_).	Full Name (Last, First, Middle Initial) James Oakley				Date of	Re	ceint					
	Mailing Address 605 S Grant St				1 1		D	D /	Y		0 ^Y 1 (
	City	State	Zip Code		Transa	ctio	n ID:	435	0750			
	Hinsdale	IL	60521-4453		Amoun	t of	Each	Rece	eipt th	is P	eriod	
	FEC ID number of contributing federal political committee.	C								2	25.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia	n n/Radiologist									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General		575.00									
	Other (specify)	0 0										
Г		4		I		*		-	-	-	71.00	

SCHEDULE A (FEC Forr	n 3X) Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 53 (check only one)									
ITEMIZED RECEIPTS	for each category of the	X 11a \Box 11b \Box 11c \Box 12									
	Detailed Summary Page										
Any information copied from such Ben	orts and Statements may not be sold or used by any perso										
or for commercial purposes, other than	using the name and address of any political committee to	o solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)											
> DuPage Medical Group LTD F	PAC										
/ .											
Full Name (Last, First, Middle Initial James Oakley)	Date of Receipt									
Mailing Address 605 S Grant S	t	M M / D D / Y Y Y Y 11 1 15 2010									
City	State Zip Code	Transaction ID: 66888C35DAACB522									
Hinsdale	IL 60521-4453	Amount of Each Receipt this Period									
	IL 00321-4433	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.		25.00									
Name of Employer	Occupation	-									
DuPage Medical Group, Ltd.	Physician/Radiologist										
Receipt For:	Aggregate Year-to-Date ▼										
Primary General	575.00	1									
Other (specify) ▼											
Full Name (Last, First, Middle Initial)										
Michael Pacetti		Date of Receipt									
Mailing Address 16957 Burr Oa	ak Dr	10 15 2010									
City	State Zip Code	Transaction ID: E925B36DC25AD577									
Homer Glen	IL 60491-6946	Amount of Each Receipt this Period									
FEC ID number of contributing		20.00									
federal political committee.		20.00									
Name of Employer	Occupation	-									
Name of Employer DuPage Medical Group, Ltd.	Chief Financial Officer										
Receipt For:	Aggregate Year-to-Date ▼										
Primary General		1									
Other (specify)	460.00]									
Full Name (Last, First, Middle Initial)										
Michael Pacetti		Date of Receipt									
Mailing Address 16957 Burr Oa	ak Dr	1 1 0 2 2 0 1 0									
City	State Zip Code	Transaction ID: DF4AD634D7776CF9									
Homer Glen	IL 60491-6946	Amount of Each Receipt this Period									
FEC ID number of contributing											
federal political committee.		20.00									
Name of Employer DuPage Medical Group, Ltd.	Occupation	7									
	Chief Financial Officer	_									
Receipt For:	Aggregate Year-to-Date 🔻										
Primary General Other (specify) ▼	460.00										
		1									
	ptional)	65.00									

				_
	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 37 / 53
			Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Cummary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	DuPage Medical Group LTD PAC			
۷ A.	, Full Name (Last, First, Middle Initial) Michael Pacetti			Date of Receipt
	Mailing Address 16957 Burr Oak Dr			M M / D D / Y Y Y Y 111 15 2010
	City	State	Zip Code	Transaction ID: 5926F556FFA9F26F0F5
	Homer Glen	IL	60491-6946	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer	Occupatio	n	
	DuPage Medical Group, Ltd.		nancial Officer	
	Receipt For:	1 I	e Year-to-Date V	-
	Primary General	Aggregate		-
	Other (specify)	0 0	460.00	
- В.	Full Name (Last, First, Middle Initial) Stephen Pierson	1		Date of Receipt
	Mailing Address 1800 N Main St			M M / D D / Y Y Y Y 10 15 2010
	City	State	Zip Code	Transaction ID: 8B350288B9E337D5417
	Wheaton	IL	60187-3112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify)		483.00]
- C.	Full Name (Last, First, Middle Initial) Stephen Pierson			Date of Receipt
0.	Mailing Address 1800 N Main St			M M / D D / Y Y Y Y 1 1 02 2010
	City	State	Zip Code	Transaction ID: F7297B9B9CE02101B1
	Wheaton	IL	60187-3112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	483.00]
ſ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		62.00
ŀ				
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) [EMIZED RECEIPTS		Use separate schedule(s) for each category of the	-	-	ER:	PAG	iE (38 / 5	3
П	EMIZED RECEIPTS		for each actogory of the		FOR LINE NUMBER: PAGE 38 / 53 (check only one)					
				X 11a 11b 11c 12						
			Detailed Summary Page	13		'	15	\vdash	16	1 17
A	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may ne name and add	∟ y not be sold or used by any pers dress of any political committee to	on for the pu	pose of :	solicit rom s	ing con	tribi mm	utions	
	NAME OF COMMITTEE (In Full)									
	DuPage Medical Group LTD PAC									
∠ A.	Full Name (Last, First, Middle Initial) Stephen Pierson			Date o	of Receip	t				
	Mailing Address 1800 N Main St			м м 11	/ D	1 ^D	/ Y		0 ^Y 1 (
	City	State	Zip Code	Transa	action ID	: 8B	DA007	795	88D8	392E2D3
	Wheaton	IL	60187-3112	Amou	nt of Eac	h Rec	ceipt thi	s P	eriod	
	FEC ID number of contributing federal political committee.	C						2	21.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For:		Year-to-Date V							
	Primary General		400.00							
	Other (specify)	0 0	483.00							
— В.	Full Name (Last, First, Middle Initial) John Porcelli			Date o	of Receip	t				
	Mailing Address 1237 N Chicago Ave			м м 1 0	1 / D	1 ^D	/ Y	ү 2	у 010	
	City	State	Zip Code	Transa	action ID	: FC	45B5E	330	C24	8F7EB3
	Arlington Heights	IL	60004-4430	Amou	nt of Eac	h Rec	ceipt thi	s P	eriod	
	FEC ID number of contributing federal political committee.	C						2	20.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	460.00]						
— C.	Full Name (Last, First, Middle Initial) John Porcelli			Date o	of Receip	t				
•	Mailing Address 1237 N Chicago Ave					02	/ Y		0 ^Y 1 (
	City	State	Zip Code	Transa	action ID	: E4	E92F1	94	F395	A45C14
	Arlington Heights	IL	60004-4430	Amou	nt of Eac	h Rec	ceipt thi	s P	eriod	
	FEC ID number of contributing federal political committee.	C				1			20.00)
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physiciar								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 460.00]						
	SUBTOTAL of Receipts This Page (optional)							6	61.00	

ļ	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 39 / 53
	TEMIZED RECEIPTS		for each category of the	(check only one)
	TEWIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Γ	Any information copied from such Reports and s or for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	DuPage Medical Group LTD PAC			
⊻ A.	Full Name (Last, First, Middle Initial) John Porcelli			Date of Receipt
	Mailing Address 1237 N Chicago Ave			M M / D D / Y Y Y Y 111 15 2010
	City	State	Zip Code	Transaction ID: 2CC90B15C7AEF01C3F
	Arlington Heights	IL	60004-4430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	460.00	
- В.	Full Name (Last, First, Middle Initial) Soujanya Pulluru			Date of Receipt
	Mailing Address 3908 Littlestone Cir			M M / D D / Y Y Y Y 10 15 2010
	City	State	Zip Code	Transaction ID: CE41A0DD37F06FB5D8
	Naperville	IL	60564-5915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 958.41	
- C.	Full Name (Last, First, Middle Initial) Soujanya Pulluru			Date of Receipt
	Mailing Address 3908 Littlestone Cir			M M / D D / Y
	City	State	Zip Code	Transaction ID: 6FF234903A7B8088087
	Naperville		60564-5915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicial		
	Receipt For: Primary General Other (specify) ▼	Aggregate	9 Year-to-Date ▼ 958.41	
_		1		

SCHEDULE A (FEC Form	3X) Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 40 / 53 (check only one)
	Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Any information copied from such Report or for commercial purposes, other than u	ts and Statements may not be sold or used by any person sing the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P/	AC	
Full Name (Last, First, Middle Initial) Soujanya Pulluru		Date of Receipt
Mailing Address 3908 Littlestone	Cir	1 1 1 5 Y Y Y Y 1 1 1 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 2E5CE5CA1282CCEE4
Naperville	IL 60564-5915	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For:	Aggregate Year-to-Date V	_
Primary General Other (specify) ▼	958.41]
Full Name (Last, First, Middle Initial) Kevin Regan		Date of Receipt
Mailing Address 31808 Village C	areen Ct	1 1 1 1 5 Y Y Y Y 1 1 1 1 5 2 0 1 0
City	State Zip Code	Transaction ID: B4B4947243AC934FA0
Warrenville	IL 60555-5923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Susan Ruzek		Date of Receipt
Susan Ruzek Mailing Address 25164 Churchil	Lane	M M / D D / Y Y Y Y 10 15 2010
City	State Zip Code	Transaction ID: CB6BE24D8B83E1F1D
<u>Glen Ellyn</u>	IL 60137	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.25
Name of Employer DuPage Medical Group, Ltd.	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.75]
SUBTOTAL of Receipts This Page (op	tional)	1060.92
TOTAL This Period (last page this line	number only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 53 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	DuPage Medical Group LTD PAC			
Α.	Full Name (Last, First, Middle Initial) Susan Ruzek			Date of Receipt
	Mailing Address 25164 Churchill Lane			M M / D D / Y Y Y Y 111 / 02 / 2010
	City Clean Filling	State	Zip Code	Transaction ID: CBE720296BB1B9FB943
	Glen Ellyn FEC ID number of contributing		60137	Amount of Each Receipt this Period
	federal political committee.	C		19.25
	Name of Employer DuPage Medical Group, Ltd.	Occupation Director	pn	
	Receipt For:	1 I	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	442.75]
В.	Full Name (Last, First, Middle Initial) Susan Ruzek			Date of Receipt
	Mailing Address 25164 Churchill Lane			M M / D D / Y Y Y Y 111 15 2010
	City	State	Zip Code	Transaction ID: F44FB4201974BD0407A
	Glen Ellyn FEC ID number of contributing federal political committee.		60137	Amount of Each Receipt this Period
	Name of Employer DuPage Medical Group, Ltd.	Occupation Director	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 442.75]
C.	Full Name (Last, First, Middle Initial) Steven Schmitz			Date of Receipt
	Mailing Address 743 Godair Cir			10 ¹ 15 ² 2010
	City	State	Zip Code	Transaction ID: 7965C87C18D7B794362
	Hinsdale FEC ID number of contributing	IL	60521-8104	Amount of Each Receipt this Period
	federal political committee.	C		20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 460.00]
	SUBTOTAL of Receipts This Page (optional)	·		58.50
	TOTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 42/53			
		Use separate schedule(s) for each category of the	(check only one)			
	EMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12			
			13 14 15 16 17			
Aı or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pers ne name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)					
	DuPage Medical Group LTD PAC					
	Full Name (Last, First, Middle Initial) Steven Schmitz		Date of Receipt			
-	Mailing Address 743 Godair Cir		1 1 0 2 2 0 1 0			
	City	State Zip Code	Transaction ID: 301D74086C0A8395FA			
	Hinsdale	IL 60521-8104	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	20.00			
	Name of Employer DuPage Medical Group, Ltd.	Occupation	_			
	Receipt For:	Physician				
	Primary General	Aggregate Year-to-Date ▼	-1			
	Other (specify)	460.00				
	Full Name (Last, First, Middle Initial) Steven Schmitz		Date of Receipt			
	Mailing Address 743 Godair Cir		M M / D D / Y Y Y Y 111 15 2010			
	City	State Zip Code	Transaction ID: F5B913476B29BC4089			
	Hinsdale	IL 60521-8104	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	20.00			
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician				
	Receipt For:	Aggregate Year-to-Date 🔻				
	Primary General Other (specify) ▼	460.00				
	Full Name (Last, First, Middle Initial) Grant Sievertsen		Date of Receipt			
	Mailing Address 1304 Midwest Club P	10 ¹ 15 ² 2010				
	City	State Zip Code	Transaction ID: D203206ED225BA9D6			
	Oak Brook	IL 60523-2519	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	19.23			
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician				
	Receipt For:	Aggregate Year-to-Date V				
	Primary General Other (specify) v	442.29				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 53 (check only one) X X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personance and address of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC		
۷ A.	Full Name (Last, First, Middle Initial) Grant Sievertsen	Date of Receipt	
	Mailing Address 1304 Midwest Club Pk	wy	1 1 / D D / Y Y Y Y 1 1 1 0 2 2 0 1 0
	City	State Zip Code	Transaction ID: 8E9C47D04A999D25AD
	Oak Brook	IL 60523-2519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.23
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	442.29	
- В.	Full Name (Last, First, Middle Initial) Grant Sievertsen		Date of Receipt
	Mailing Address 1304 Midwest Club Pk	1 1 1 5 2 0 1 0	
	City	State Zip Code	Transaction ID: C1302E75E2B496F4988
	Oak Brook	IL 60523-2519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.23
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 442.29]
- C.	Full Name (Last, First, Middle Initial) Amy Stoeffler		Date of Receipt
	Mailing Address 532 Deerpath Rd		10 ^{//} 15 [/] 2010
	City	State Zip Code	Transaction ID: 20A51F659730963BE5E
	<u>Glen Ellyn</u>	IL 60137-4102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date 958.41]
ſ	SUBTOTAL of Receipts This Page (optional)		80.13
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: P	AGE 44 / 53			
	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
			Detailed Summary Page	X 11a 11b 11				
Г				13 14 15				
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers	on for the purpose of soliciting of soliciting of solicit contributions from such	committee			
	NAME OF COMMITTEE (In Full)							
	DuPage Medical Group LTD PAC							
	Durage Medical Group LTD FAC							
∡ A.	Full Name (Last, First, Middle Initial) Amy Stoeffler			Date of Receipt				
	Mailing Address 532 Deerpath Rd			M M / D D / 1 1 0 2	2010			
	City	State	Zip Code	Transaction ID: FBE54	AE794852AC8A8			
	Glen Ellyn	IL	60137-4102	Amount of Each Receipt				
	FEC ID number of contributing				· · · · ·			
	federal political committee.	С			41.67			
	Name of Employer	Occupatio	n	-				
	DuPage Medical Group, Ltd.	Physicia	n					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General		958.41	1				
	Other (specify)	0.0						
- -	Full Name (Last, First, Middle Initial)			Dete of Descipt				
В.	Amy Stoeffler Mailing Address 532 Deerpath Rd			Date of Receipt	Y Y Y Y			
	Maning Address 352 Deerpath Ru			11 15	2010			
	City	State	Zip Code	Transaction ID: CA954	IEE5B412841793			
	<u>Glen Ellyn</u>	IL	60137-4102	Amount of Each Receipt	this Period			
	FEC ID number of contributing	С			41.67			
	federal political committee.				41.07			
	Name of Employer DuPage Medical Group, Ltd.	Occupatio	on					
	DuPage Medical Group, Ltd.	Physicia	n					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General		958.41	1				
	Other (specify)	0.0						
- C.	Full Name (Last, First, Middle Initial) Arnaldo Torres	1		Date of Receipt				
0.	Mailing Address 229 Wren Ct				Y Y Y Y			
				10 15	2010			
	City	State	Zip Code	Transaction ID: 6A99E)14FF10AE772BF			
	Bloomingdale	IL	60108-1433	Amount of Each Receipt	this Period			
	FEC ID number of contributing	С			19.23			
	federal political committee.							
	Name of Employer DuPage Medical Group, Ltd.	Occupatio		7				
		Physicia						
	Receipt For:	Aggregate	e Year-to-Date 🔻	_				
	Other (specify) ▼		462.06					
		<u> </u>	8 8 8 8 8 8 8 8	-				
ſ		•			102.57			
	SUBTOTAL of Receipts This Page (optional)				102.37			
ſ								
	TOTAL This Period (last page this line number	only)						

;	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 53 (check only one)
	TEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC		
۷ A.	Full Name (Last, First, Middle Initial) Arnaldo Torres		Date of Receipt
	Mailing Address 229 Wren Ct		M M / D D / Y Y Y Y 1 1 0 2 2 0 1 0
	City	State Zip Code	Transaction ID: 5E0177BBE4820836E98
	Bloomingdale	IL 60108-1433	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.23
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	462.06	
- В.	Full Name (Last, First, Middle Initial) Arnaldo Torres		Date of Receipt
	Mailing Address 229 Wren Ct		M M / D D / Y Y Y Y 111 15 2010
	City	State Zip Code	Transaction ID: E3EC40F981322794ABE
	Bloomingdale	IL 60108-1433	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify)	462.06	
- C.	Full Name (Last, First, Middle Initial) Joseph Towers	Date of Receipt	
	Mailing Address 412 S Columbia St		M M / D D / Y Y Y Y 10 15 2010
	City	State Zip Code	Transaction ID: 51A95654F33FD609F09
	Naperville FEC ID number of contributing	IL 60540-5418	Amount of Each Receipt this Period
	federal political committee.	C	41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	958.41	
ſ	SUBTOTAL of Receipts This Page (optional)	·····	99.90
ŀ	TOTAL This Period (last page this line number	only)	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 46 / 53				
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
I			Detailed Summary Page	X 11a 11b 11c 12				
_			, ,	13 14 15 16 17				
A c	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and addr	not be sold or used by any pers ess of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	DuPage Medical Group LTD PAC							
Z	Full Name (Last, First, Middle Initial)			Data of Descipt				
•	Joseph Towers Mailing Address 412 S Columbia St			Date of Receipt				
	City	State	Zip Code	Transaction ID: A839B1AE3CADD17D7				
	Naperville	IL	•					
		IL	60540-5418	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		41.67				
	Name of Employer DuPage Medical Group, Ltd.	Occupation						
		Physician	(and a Data 🛡	_				
	Receipt For: Primary General	Aggregate	Year-to-Date					
	Other (specify) ▼	0 0	958.41					
	Full Name (Last, First, Middle Initial)							
•	Joseph Towers			Date of Receipt				
	Mailing Address 412 S Columbia St			1 1 ^D ^D ^Y				
	City	State	Zip Code	Transaction ID: 9D74BA43EAFA6D186				
	Naperville	IL	60540-5418	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		41.67				
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		-				
	Receipt For:	1						
	Primary General	Aggregate	Year-to-Date 🔻	_				
	Other (specify) ▼	0 0	958.41					
_	Full Name (Last, First, Middle Initial)	1		Date of Peoplint				
•	Rebecca Tung Mailing Address 175 F Delaware Pl			Date of Receipt				
	Mailing Address 175 E Delaware Pl Apt 4911							
	City	State	Zip Code	Transaction ID: E0337CB20EA889BEB				
	Chicago	IL	60611-7715	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		29.00				
	Name of Employer DuPage Medical Group, Ltd.	Occupation						
		Physician						
	Receipt For:	Aggregate `	Year-to-Date 🔻	_				
			514.00					
	Primary General Other (specify) ▼		517.00					
Γ		0 0	0 0 0 0 0 0 0 0 0	112.34				

	SCHEDULE A (FEC Form 3X)	Use separate schedule	FOR LINE NUMBER: PAGE 47/53
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Pag	
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by an name and address of any political comm	y person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC		
Α.	Full Name (Last, First, Middle Initial) Rebecca Tung		Date of Receipt
	Mailing Address 175 E Delaware Pl Apt 4911		M M / D D / Y Y Y Y 111 02 2010
	City	State Zip Code	Transaction ID: 9AAC979B36109D9D8D4
	Chicago	IL 60611-7715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	29.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	514.0	00
в.	Full Name (Last, First, Middle Initial) Rebecca Tung		Date of Receipt
	Mailing Address 175 E Delaware Pl Apt 4911		M M / D D / Y Y Y Y 11 1 15 / 2010
	City	State Zip Code	Transaction ID: 63197570CF6626FDEA2
	Chicago	IL 60611-7715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	29.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date	
	Other (specify) ▼	514.0	
C.	Full Name (Last, First, Middle Initial) Caroline Wolfe		Date of Receipt
	Mailing Address 132 E Fremont Ave		10 ^M / 15 ^J / Y Y Y Y 10 ^D / 15 ^J / 2010
	City	State Zip Code	Transaction ID: B20B97F66F56156C16E
	Elmhurst	IL 60126-2324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	460.0	
	SUBTOTAL of Receipts This Page (optional)		78.00
	TOTAL This Period (last page this line number	only)	

(SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 48/53			
	TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)			
I	TEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12			
Γ	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.			
	DuPage Medical Group LTD PAC					
∠ A.	Full Name (Last, First, Middle Initial) Caroline Wolfe		Date of Receipt			
	Mailing Address 132 E Fremont Ave		M M / D D Y			
	City	State Zip Code	Transaction ID: D92CD99CFAB3874721			
	<u>Elmhurst</u>	IL 60126-2324	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	20.00			
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General Other (specify) ▼	460.00				
- В.	Full Name (Last, First, Middle Initial) Caroline Wolfe		Date of Receipt			
	Mailing Address 132 E Fremont Ave		M M / D D / Y			
	City	State Zip Code	Transaction ID: E61C7EE848BF0093F63			
	Elmhurst	IL 60126-2324	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	20.00			
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician				
	Receipt For:	Aggregate Year-to-Date 🔻				
	Primary General Other (specify) ▼	460.00				
- C.	Full Name (Last, First, Middle Initial) Eva Wyrma	I	Date of Receipt			
	Mailing Address 25346 Canterbury Cou	M M / D D / Y				
	City Clea Ellura	State Zip Code	Transaction ID: B2E08AB66B7257FBFD			
	Glen Ellyn	IL 60137	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		1000.00			
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician				
	Receipt For: Primary General	Aggregate Year-to-Date V				
	Other (specify)	1400.00				
ſ	SUBTOTAL of Receipts This Page (optional)		▶ 1040.00			
F	TOTAL This Period (last page this line number	only)				

	SCHEDULE A (FEC Form 3X)		Use separate sched		FOR LINE NUMBER: PAGE 49 / 53 (check only one)
	ITEMIZED RECEIPTS		for each category of Detailed Summary I		$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	⊥ y not be sold or used by dress of any political co	any person mmittee to s	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)				
	> DuPage Medical Group LTD PAC				
Α.	Full Name (Last, First, Middle Initial) Andrew Yu				Date of Receipt
	Mailing Address 1601 S Highland Ave				M M / D D / Y
	City	State	Zip Code		Transaction ID: 37DC787D98D0F44A741
	Lombard	IL	60148-4928		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician			-
	Receipt For:	1 1	Year-to-Date 🔻		1
	Other (specify)	0 0	47	'9.09	
В.	Full Name (Last, First, Middle Initial) Andrew Yu				Date of Receipt
	Mailing Address 1601 S Highland Ave				M M / D D / Y Y Y Y 11 02 2010
	City	State	Zip Code		Transaction ID: 3E1A3675E5691956958
	Lombard	<u> </u>	60148-4928		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician			
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) The second		47	' 9.09	
C.	Full Name (Last, First, Middle Initial) Andrew Yu				Date of Receipt
	Mailing Address 1601 S Highland Ave				M M / D D / Y Y Y Y 111 15 2010
	City	State	Zip Code		Transaction ID: 3CA00FC15EF6B85A000
	Lombard		60148-4928		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			20.83
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia			
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼	0 0	47	9.09	
	SUBTOTAL of Receipts This Page (optional)			►	62.49
	TOTAL This Period (last page this line number				5640.85

SCHEDULE B (FEC Form 3X)		r Use	Use separate schedule(s)				FOR LINE NUMBER: PAGE 50 / 53 (check only one)										
remized di	SBURSEMEN	TS for e	each d	category of the Summary Page	. -		21b 27	П	22 28a		23 28b		24 28c	F	25 29	F	26 30k
	ied from such Reports irposes, other than usi						perso		the pu		ose of		ting co		ibution		100.
`	MITTEE (In Full) cal Group LTD PAC	>															
	First, Middle Initial) Congress Committ	ee									tion II Disbur			4ED	9F12	2CF	=4E8
Mailing Address	PO Box 703							_	1 ^M 0	М	/ D	2 ^D		Ý	žo i	0 ^Y	
City Geneva		State IL		Zip Code 60134					Amou	unt	of Eac	h Di	sburse	-	nt this	-	od
Purpose of Disb 2010 General Candidate Name						01			L.					10	0.00	0 0	
Bill Foster	X House	Disbursement F		2010		iteg Typ	ory/ e	_									
State: IL	Senate President District: 14	Prima	ary	X Genera													
Full Name (Last, Judy Biggert f	First, Middle Initial) or Congress								Date	of E	Disbur	seme			67AA		CB3
Mailing Address	PO Box 637	37							[™] 0	М	/ D	2 ^D		Ý	žo i	0 ^Y	
City Hinsdale		State IL		Zip Code 60522					Amou	unt	of Eac	h Di	sburse		nt this	0	od
Purpose of Disb 2010 General						01			L.					1(00.00	0	
Candidate Name Judy Biggert Office Sought:	X House	Disbursement F	For	2010		iteg Typ	ory/ e	_									
State: IL	X House Senate President District: 13	Prima	ary	X Genera													
Full Name (Last, Kinzinger for (First, Middle Initial) Congress								Date	of E	Disbur	seme	-		BCF76		470F
Mailing Address	PO Box 1050								[™] 0	м	/ D	2 ^D		Y 2	žo i	0	
City Bourbonnais		State IL		Zip Code 60914					Amou	unt	of Eac	h Di	sburse		nt this		od
2010 General							1		L.					1(0.00	Ů	
Candidate Name Adam Kinzing Office Sought:	nzinger Type																
State: IL	Senate President District: 11	Prima	ary	X Genera cify) ▼													
SUBTOTAL of Dis	bursements This Page	e (optional)					►							30	0.00	Q	

	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check onl 21b 27	E NUMBER: y one) 22 X 23 28a 28b	PAGE 51 / 53 24 25 26 28c 29 30b
	Any Information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC				
Α.	Full Name (Last, First, Middle Initial) Randy Hultgren for Congress Mailing Address PO Box 39			Transaction ID: 0, Date of Disbursemer 10 ^M / ²⁶	A32D655828A52C77EB
	2	State Zip Code IL 60510	011 Category/	Amount of Each Disl	bursement this Period
	Randall M. Hultgren Office Sought: X House Disburse Senate President Image: Compare the senate of the senat of the senate of the senate of the senate	ement For: 2010 Primary X General Other (specify) ▼	Туре		

	SUBTOTAL of Disbursements This Page (optional)	►	1000.00
	TOTAL This Period (last page this line number only)	►	4000.00
i	FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)

CHEDULE B (FEC Form 3X)	Use separate schedule(s)			IE NUMBER: PAGE 52 / 53										
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ļ	21b 27	P	22 28a	F	23 28b			24 28c	X	25 29		26 301
ny Information copied from such Reports and State for commercial purposes, other than using the na														
NAME OF COMMITTEE (In Full)														
DuPage Medical Group LTD PAC														
Full Name (Last, First, Middle Initial) Citizens for Bill Brady, Inc.							tion II Disbur				C39)7E	682	C63A
Mailing Address PO Box 5314					[™] 0	М	/ D	26	/	Y	ž	0 ľ	0 [×]	
City Bloomington	State Zip Code IL 61702				Amou	unt	of Eac	h Di	isbu	urser	nent	this	s Per	iod
Purpose of Disbursement Nonfederal Contribution		0	11		L.						500	0.0	00	
Candidate Name		Cate	egory/ /pe											
Senate President	sement For: Primary General Other (specify) ▼		<u>.</u>											
State: District:				_										
Full Name (Last, First, Middle Initial) Citizens to Elect Darlene Senger					Date	of I	tion II Disbur	sem	ent					F45E
Mailing Address 598 S Whispering Hills Dr														
City Naperville	State Zip Code IL 60540				Amou	unt	of Eac	h Di	isbu	urser	-	-	-	iod
Purpose of Disbursement Nonfederal Contribution		0	11				100	0.0	00					
Candidate Name			egory/ /pe											
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼													
Full Name (Last, First, Middle Initial) Citizens to Elect Patricia R. Bellock							tion II Disbur			-	194	40E	3A80)5E4
Mailing Address 221 Grant Ave					[™] 0	М	/ D	26	/	Y	ž	0 ľ	0 [×]	
City Clarendon Hills	State Zip Code IL 60514-1326				Amo	unt	of Eac	h Di	isbu	urser	nent	this	s Per	iod
Purpose of Disbursement Nonfederal Contribution		011 Category/ Type			L.						250	0.0	00	
Candidate Name														
Senate President	sement For: Primary General Other (specify) ▼													
State: District:								-	_		-	-		
SUBTOTAL of Disbursements This Page (optional)										850	0.0	00	.

FE6AN026

FEC Schedule B (Form 3X) (Revised 02/2003)

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
	ny Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
Α.	Full Name (Last, First, Middle Initial) Citizens to Elect Tom Cross			Transaction ID: ECA05C6C04804636494 Date of Disbursement
	Mailing Address 24047 W Lockport St, S			
	City Plainfield	State Zip Code IL 60544		Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution		011	2500.00
	Candidate Name		Category/ Type	
	Senate President	sement For: Primary General Other (specify) ▼		
В.	State: District: Full Name (Last, First, Middle Initial) Friends of Sandra Pihos			Transaction ID: ECD1589126A3DC4B49 Date of Disbursement
	Mailing Address Bldg 2, Ste 111B 799 Roosevelt Rd			$10^{\text{M}} 10^{\text{M}} 10^{\text{D}} 26^{\text{D}} 10^{\text{V}}$
	City Glen Ellyn	StateZip CodeIL60137-5908		Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution		011	1000.00
	Candidate Name		Category/ Type	
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	►	3500.00
TOTAL This Period (last page this line number only)	►	12000.00

FE6AN026

FEC Schedule B (Form 3X) (Revised 02/2003)