



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ILLINOIS VICTORY

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		33418.01
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	23252.73									
(c) Total Receipts (from Line 19) .....	96300.00	368882.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	119552.73	402300.57								
7. Total Disbursements (from Line 31) .....	16710.28	299458.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	102842.45	102842.45								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
ILLINOIS VICTORY

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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) .....	96300.00	116200.00
(ii) Unitemized .....	0.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	96300.00	116250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	25604.81
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	96300.00	141854.81
12. Transfers From Affiliated/Other Party Committees .....	0.00	217675.25
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	9352.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	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)) .....	96300.00	368882.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	96300.00	368882.56

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. 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.....	16710.28	169592.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16710.28	169592.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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 .....	0.00	127865.45
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	127865.45
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16710.28	299458.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16710.28	299458.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	96300.00	141854.81
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	96300.00	141854.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16710.28	169592.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	9352.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16710.28	160240.17

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

**A.**

Full Name (Last, First, Middle Initial) Andrew Athens		Date of Receipt MM / DD / YYYY 10 / 08 / 2010
Mailing Address 980 North Michigan Ave		<b>Transaction ID:</b> SA11AI.8176
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10000.00
Name of Employer UHAC NATIONAL	Occupation Chairman	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**B.**

Full Name (Last, First, Middle Initial) Louise Athens		Date of Receipt MM / DD / YYYY 10 / 07 / 2010
Mailing Address 75 East Walker Drive		<b>Transaction ID:</b> SA11AI.8178
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 6750.00
Name of Employer Homemaker	Occupation Homemaker	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6750.00	

**C.**

Full Name (Last, First, Middle Initial) Nancie Blatt		Date of Receipt MM / DD / YYYY 10 / 08 / 2010
Mailing Address 370-D Park Ave		<b>Transaction ID:</b> SA11AI.8203
City Highland Park	State IL	Zip Code 60035
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>17250.00</b>
<b>TOTAL</b> 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 7 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

<b>A.</b>	Full Name (Last, First, Middle Initial) Alan Brodie		Date of Receipt
	Mailing Address 2016 N Cleveland Ave		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chicago	IL	60614
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8197
Name of Employer Retired		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
			contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Kieran Conlon		Date of Receipt
	Mailing Address 1921 N Dayton St		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chicago	IL	60614
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8184
Name of Employer CONLON & CO		Occupation real estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
			contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Sean Conlon		Date of Receipt
	Mailing Address 1101 W Lake St		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chicago	IL	60607
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.8188
Name of Employer CONLON & CO		Occupation Founder	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
			contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="21000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 17  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

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

Mailing Address 14001 S. Karlov

City State Zip Code  
CRESTWOOD IL 60445

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

Name of Employer Occupation  
TRI STATE AUTO AUCTION Auto Dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 06 / 2010

**Transaction ID:** SA11AI.8186

Amount of Each Receipt this Period  
10000.00

contributions

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

Mailing Address 1500 Sheridan Rd

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
None retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 08 / 2010

**Transaction ID:** SA11AI.8199

Amount of Each Receipt this Period  
500.00

contribution

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

Mailing Address 1801 Southland Ave.

City State Zip Code  
CHICAGO IL 60603

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

Name of Employer Occupation  
Dry Enterprises Importer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7750.00

Date of Receipt  
MM / DD / YYYY  
10 / 07 / 2010

**Transaction ID:** SA11AI.8192

Amount of Each Receipt this Period  
7750.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **18250.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 17  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Frank Kamberos

Mailing Address 3601 W Devon Ave

City Chicago State IL Zip Code 60659

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 ▼ 8200.00

Date of Receipt 10 / 08 / 2010  
Transaction ID: SA11AI.8195  
Amount of Each Receipt this Period 8200.00  
Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Jack Levin

Mailing Address 985 Sheridan Rd

City Winnetka State IL Zip Code 60093

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 08 / 2010  
Transaction ID: SA11AI.8201  
Amount of Each Receipt this Period 1000.00  
contribution

**C.**

Full Name (Last, First, Middle Initial)  
Carol Mouyiaris

Mailing Address 425 E 58 St, Apt 32H

City New York State NY Zip Code 10022

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

Name of Employer Black Opal Cosmetics Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 04 / 2010  
Transaction ID: SA11AI.8182  
Amount of Each Receipt this Period 10000.00  
contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 19200.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 17  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

**A.**

Full Name (Last, First, Middle Initial)  
Nikos Mouyiaris

Mailing Address 425 E 58 St, Apt 32H

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Mana Productions CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2010

**Transaction ID:** SA11AI.8180

Amount of Each Receipt this Period  
10000.00

contributions

**B.**

Full Name (Last, First, Middle Initial)  
Chris Tomaras

Mailing Address 360 N. Michigan Ave

City State Zip Code  
Chicago IL 60601

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

Name of Employer Occupation  
COUNCIL OF HELLENES ABROAD VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 06 / 2010

**Transaction ID:** SA11AI.8190

Amount of Each Receipt this Period  
10000.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Sarita Warshawsky

Mailing Address 209 E Lake Shore Rd

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
10 / 08 / 2010

**Transaction ID:** SA11AI.8205

Amount of Each Receipt this Period  
600.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 20600.00

**TOTAL** This Period (last page this line number only) ..... ► 96300.00

# 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)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

A.	Full Name (Last, First, Middle Initial) 29/39 S LaSalle Holdings  Mailing Address 29 S LaSalle St  City Chicago State IL Zip Code 60603  Purpose of Disbursement Office rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8155 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 3642.20
B.	Full Name (Last, First, Middle Initial) AGL Computers  Mailing Address South Haven SQ 390 W US HWY 6 Unit  City Valparaiso State IN Zip Code 46368  Purpose of Disbursement phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8156 Date of Disbursement 10 / 04 / 2010  Amount of Each Disbursement this Period 323.00
C.	Full Name (Last, First, Middle Initial) AGL Computers  Mailing Address South Haven SQ 390 W US HWY 6 Unit  City Valparaiso State IN Zip Code 46368  Purpose of Disbursement Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8157 Date of Disbursement 10 / 04 / 2010  Amount of Each Disbursement this Period 73.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4038.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 17

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AGL Computers</p> <p>Mailing Address South Haven SQ 390 W US HWY 6 Unit</p> <p>City Valparaiso State IN Zip Code 46368</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8159</p> <p>Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 43.70</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AGL Computers</p> <p>Mailing Address South Haven SQ 390 W US HWY 6 Unit</p> <p>City Valparaiso State IN Zip Code 46368</p> <p>Purpose of Disbursement Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8165</p> <p>Date of Disbursement 10 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 363.85</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AGL Computers</p> <p>Mailing Address South Haven SQ 390 W US HWY 6 Unit</p> <p>City Valparaiso State IN Zip Code 46368</p> <p>Purpose of Disbursement Mobile Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8173</p> <p>Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 2029.00</p>

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

2436.55

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

A.	Full Name (Last, First, Middle Initial) Cricket Communications	Transaction ID: SB21B.8168 Date of Disbursement
	Mailing Address P.O. Box 650755	<input type="text" value="10"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Dallas State TX Zip Code 75265	Amount of Each Disbursement this Period
	Purpose of Disbursement Phones	<input type="text" value="2463.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Grundy County Democratic Central Committee	Transaction ID: SB21B.8154 Date of Disbursement
	Mailing Address PO Box 602	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Morris State IL Zip Code 60450	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Rent	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hansen Associates	Transaction ID: SB21B.8169 Date of Disbursement
	Mailing Address 888 E Belvidere Rd	<input type="text" value="10"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Grayslake State IL Zip Code 60030	Amount of Each Disbursement this Period
	Purpose of Disbursement Office equipment	<input type="text" value="313.96"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3776.96"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

A.	Full Name (Last, First, Middle Initial) Hatco Inc	Transaction ID: SB21B.8160 Date of Disbursement 10 / 04 / 2010
	Mailing Address 59 South 2nd Avenue	Amount of Each Disbursement this Period 1853.28
	City Lombard State IL Zip Code 60148	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hatco Inc	Transaction ID: SB21B.8162 Date of Disbursement 10 / 04 / 2010
	Mailing Address 59 South 2nd Avenue	Amount of Each Disbursement this Period 213.84
	City Lombard State IL Zip Code 60148	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JPMorgan Chase Bank	Transaction ID: SB21B.8167 Date of Disbursement 10 / 05 / 2010
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 34.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Bank service charge	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2101.12
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

A.	Full Name (Last, First, Middle Initial) JPMorgan Chase Bank	Transaction ID: SB21B.8170 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank service charge	<input type="text" value="34.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JPMorgan Chase Bank	Transaction ID: SB21B.8171 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank service charge	<input type="text" value="34.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JPMorgan Chase Bank	Transaction ID: SB21B.8172 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Service Charge	<input type="text" value="34.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="102.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) JPMorgan Chase Bank</p> <p>Mailing Address PO Box 260180</p> <p>City Baton Rouge State LA Zip Code 70826</p> <p>Purpose of Disbursement Bank service charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8174</p> <p>Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 34.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) JPMorgan Chase Bank</p> <p>Mailing Address PO Box 260180</p> <p>City Baton Rouge State LA Zip Code 70826</p> <p>Purpose of Disbursement bank service charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8175</p> <p>Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kankakee County Democrats</p> <p>Mailing Address 2034 S 10000W Rd</p> <p>City Bonfield State IL Zip Code 60913</p> <p>Purpose of Disbursement Office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.8153</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

549.00

**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)

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

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NAME OF COMMITTEE (In Full)  
ILLINOIS VICTORY

**A.** Full Name (Last, First, Middle Initial)  
Mid Central Projects

Mailing Address PO Box 3619

City Joliet State IL Zip Code 60434

Purpose of Disbursement Office Rent

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.8166  
Date of Disbursement 10 / 05 / 2010

Amount of Each Disbursement this Period 1500.00

Category/Type

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

Mailing Address 430 Milwaukee Ave

City Lincolnshire State IL Zip Code 60069

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.8163  
Date of Disbursement 10 / 04 / 2010

Amount of Each Disbursement this Period 2206.45

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 3706.45

**TOTAL** This Period (last page this line number only) ..... ► 16710.28