

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Community Bankers Association of Illinois FedPac

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		17226.74
(b) Cash on Hand at Beginning of Reporting Period.....	21734.63	
(c) Total Receipts (from Line 19)	5346.06	14011.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	27080.69	31238.08
7. Total Disbursements (from Line 31).....	6668.81	10826.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	20411.88	20411.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Community Bankers Association of Illinois FedPac

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3700.47	7934.61
(ii) Unitemized	1615.24	6015.92
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5315.71	13950.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5315.71	13950.53
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	30.35	60.81
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 Transfers (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))..... ▶	5346.06	14011.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5346.06	14011.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	3918.81	6076.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3918.81	6076.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2750.00	4750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6668.81	10826.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6668.81	10826.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	5315.71	13950.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5315.71	13950.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3918.81	6076.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3918.81	6076.20

**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 6 OF 27
<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial) A. Jerry Cavanaugh		Date of Receipt MM / DD / YYYY 07 / 29 / 2011 Transaction ID : SA11AI.6917
Mailing Address 2304 Westchester Blvd		Amount of Each Receipt this Period 10.00
City Springfield	State IL	Zip Code 62704
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer CBAI	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Jerry Cavanaugh		Date of Receipt MM / DD / YYYY 08 / 31 / 2011 Transaction ID : SA11AI.6957
Mailing Address 2304 Westchester Blvd		Amount of Each Receipt this Period 10.00
City Springfield	State IL	Zip Code 62704
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer CBAI	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Jerry Cavanaugh		Date of Receipt MM / DD / YYYY 09 / 30 / 2011 Transaction ID : SA11AI.6973
Mailing Address 2304 Westchester Blvd		Amount of Each Receipt this Period 10.00
City Springfield	State IL	Zip Code 62704
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer CBAI	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<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)
Community Bankers Association of Illinois FedPac

A. Jerry Cavanaugh
Full Name (Last, First, Middle Initial)

Mailing Address 2304 Westchester Blvd

City Springfield State IL Zip Code 62704

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

Name of Employer CBAI Occupation Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2011

Transaction ID : SA11AI.6989

Amount of Each Receipt this Period
 89.90

Contribution

B. Jerry Cavanaugh
Full Name (Last, First, Middle Initial)

Mailing Address 2304 Westchester Blvd

City Springfield State IL Zip Code 62704

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

Name of Employer CBAI Occupation Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **339.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011

Transaction ID : SA11AI.7002

Amount of Each Receipt this Period
 10.00

Contribution

C. Jerry Cavanaugh
Full Name (Last, First, Middle Initial)

Mailing Address 2304 Westchester Blvd

City Springfield State IL Zip Code 62704

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

Name of Employer CBAI Occupation Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **349.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : SA11AI.7019

Amount of Each Receipt this Period
 10.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	109.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)
A. Jerry Cavanaugh

Mailing Address 2304 Westchester Blvd

City Springfield State IL Zip Code 62704

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

Name of Employer CBAI Occupation Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **359.90**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SA11AI.7039

Amount of Each Receipt this Period
10.00

Contribution

Full Name (Last, First, Middle Initial)
B. James R Dingman

Mailing Address PO Box 9

City Orion State IL Zip Code 61273

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

Name of Employer BankOrion Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **286.80**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 26 / 2011

Transaction ID : SA11AI.6925

Amount of Each Receipt this Period
87.60

Travel Contribution

Full Name (Last, First, Middle Initial)
C. James R Dingman

Mailing Address PO Box 9

City Orion State IL Zip Code 61273

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

Name of Employer BankOrion Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **364.40**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SA11AI.7030

Amount of Each Receipt this Period
77.60

Travel Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ **175.20**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<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)
Community Bankers Association of Illinois FedPac

A. Dax Garrison
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 241

City Irvington	State IL	Zip Code 62848
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FEC ID number of contributing federal political committee. **C**

Name of Employer Community Trust Bank, Irvingto	Occupation Banker
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2011

Transaction ID : SA11AI.6916

Amount of Each Receipt this Period
166.50

Travel Contribution

B. Todd Grayson
Full Name (Last, First, Middle Initial)
Mailing Address 525 West Roosevelt Rd.

City Chicago	State IL	Zip Code 60607
-----------------	-------------	-------------------

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

Name of Employer South Central Bank	Occupation EVP
--	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2011

Transaction ID : SA11AI.7000

Amount of Each Receipt this Period
145.00

Travel Contribution

C. Dennis Hesker
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 128

City Okawville	State IL	Zip Code 62271
-------------------	-------------	-------------------

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

Name of Employer The FNB of Okawville	Occupation President & CEO
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
608.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2011

Transaction ID : SA11AI.6933

Amount of Each Receipt this Period
122.10

Travel Contribution

SUBTOTAL of Receipts This Page (optional).....▶	433.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<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)
Community Bankers Association of Illinois FedPac

A. Dennis Hesker
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 128

City Okawville State IL Zip Code 62271

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

Name of Employer The FNB of Okawville Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1238.34**

Date of Receipt **09 / 30 / 2011**

Transaction ID : SA11AI.6980

Amount of Each Receipt this Period **629.64**

Travel Contribution

B. Dennis Hesker
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 128

City Okawville State IL Zip Code 62271

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

Name of Employer The FNB of Okawville Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1360.44**

Date of Receipt **10 / 28 / 2011**

Transaction ID : SA11AI.6999

Amount of Each Receipt this Period **122.10**

Travel Contribution

C. Dennis Hesker
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 128

City Okawville State IL Zip Code 62271

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

Name of Employer The FNB of Okawville Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1482.54**

Date of Receipt **12 / 19 / 2011**

Transaction ID : SA11AI.7026

Amount of Each Receipt this Period **122.10**

Travel Contribution

SUBTOTAL of Receipts This Page (optional)..... **873.84**

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 11 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)
A. Rick Jameson

Mailing Address Box 9

City State Zip Code
 Tremont IL 61568

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

Name of Employer Occupation
 Tremont Savings Bank President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 648.44

Date of Receipt
 08 / 26 / 2011
Transaction ID : SA11AI.6932

Amount of Each Receipt this Period
 69.92

Travel Contribution

Full Name (Last, First, Middle Initial)
B. Rick Jameson

Mailing Address Box 9

City State Zip Code
 Tremont IL 61568

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

Name of Employer Occupation
 Tremont Savings Bank President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 848.44

Date of Receipt
 09 / 30 / 2011
Transaction ID : SA11AI.6981

Amount of Each Receipt this Period
 200.00

Travel Contribution

Full Name (Last, First, Middle Initial)
C. Gerald Johnson

Mailing Address P.O. Box 97

City State Zip Code
 Grand Ridge IL 61325

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

Name of Employer Occupation
 The First National Bank President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 467.22

Date of Receipt
 10 / 28 / 2011
Transaction ID : SA11AI.6997

Amount of Each Receipt this Period
 164.28

Travel Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 434.20

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial) A. Gerald Johnson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2011 Transaction ID : SA11AI.6998
Mailing Address P.O. Box 97		Amount of Each Receipt this Period 224.24
City Grand Ridge	State IL	Zip Code 61325
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer The First National Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 691.46	

Full Name (Last, First, Middle Initial) B. Gerald Johnson		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 Transaction ID : SA11AI.7027
Mailing Address P.O. Box 97		Amount of Each Receipt this Period 174.27
City Grand Ridge	State IL	Zip Code 61325
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer The First National Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.73	

Full Name (Last, First, Middle Initial) C. Jeff Rabenort		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2011 Transaction ID : SA11AI.6930
Mailing Address P.O. Box 309		Amount of Each Receipt this Period 129.87
City Nashville	State IL	Zip Code 62233
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer Farmers & Merchants Nat Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.87	

SUBTOTAL of Receipts This Page (optional).....▶	528.38
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 13 OF 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial) A. Jeff Rabenort		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2011 Transaction ID : SA11AI.7036
Mailing Address P.O. Box 309		Amount of Each Receipt this Period 128.70
City Nashville	State IL	Zip Code 62233
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer Farmers & Merchants Nat Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.57	

Full Name (Last, First, Middle Initial) B. Brad Rensch		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2011 Transaction ID : SA11AI.6927
Mailing Address 200 West Third		Amount of Each Receipt this Period 82.14
City Alton	State IL	Zip Code 62002
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer Meridian Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.13	

Full Name (Last, First, Middle Initial) C. Brad Rensch		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2011 Transaction ID : SA11AI.6994
Mailing Address 200 West Third		Amount of Each Receipt this Period 82.14
City Alton	State IL	Zip Code 62002
FEC ID number of contributing federal political committee. C	Travel Contribution	
Name of Employer Meridian Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.27	

SUBTOTAL of Receipts This Page (optional).....▶	292.98
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)
A. David Schroeder

Mailing Address 107 W Sheridan Place

City State Zip Code
 Lake Bluff IL 60044

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

Name of Employer Occupation
 CBAI VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 441.76

Date of Receipt
 07 / 29 / 2011
Transaction ID : SA11AI.6921

Amount of Each Receipt this Period
 41.68

Contribution

Full Name (Last, First, Middle Initial)
B. David Schroeder

Mailing Address 107 W Sheridan Place

City State Zip Code
 Lake Bluff IL 60044

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

Name of Employer Occupation
 CBAI VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 483.44

Date of Receipt
 08 / 31 / 2011
Transaction ID : SA11AI.6961

Amount of Each Receipt this Period
 41.68

Contribution

Full Name (Last, First, Middle Initial)
C. David Schroeder

Mailing Address 107 W Sheridan Place

City State Zip Code
 Lake Bluff IL 60044

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

Name of Employer Occupation
 CBAI VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.12

Date of Receipt
 09 / 30 / 2011
Transaction ID : SA11AI.6977

Amount of Each Receipt this Period
 41.68

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Community Bankers Association of Illinois FedPac

A. David Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 107 W Sheridan Place

City Lake Bluff State IL Zip Code 60044

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

Name of Employer CBAI Occupation VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **566.80**

Date of Receipt **10 / 31 / 2011**

Transaction ID : SA11AI.7006

Amount of Each Receipt this Period **41.68**

Contribution

B. David Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 107 W Sheridan Place

City Lake Bluff State IL Zip Code 60044

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

Name of Employer CBAI Occupation VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **608.48**

Date of Receipt **11 / 30 / 2011**

Transaction ID : SA11AI.7023

Amount of Each Receipt this Period **41.68**

Contribution

C. David Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 107 W Sheridan Place

City Lake Bluff State IL Zip Code 60044

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

Name of Employer CBAI Occupation VP Federal Governmental Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.16**

Date of Receipt **12 / 30 / 2011**

Transaction ID : SA11AI.7043

Amount of Each Receipt this Period **41.68**

Contribution

SUBTOTAL of Receipts This Page (optional)..... **125.04**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
<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)
Community Bankers Association of Illinois FedPac

A. Preston Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1300 U.S. Highway 40

City Greenville	State IL	Zip Code 62246
--------------------	-------------	-------------------

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

Name of Employer The First National Bank	Occupation Bank President
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **422.15**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2011

Transaction ID : SA11AI.6929

Amount of Each Receipt this Period

72.15

Travel Contribution

B. Mary Sulser
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 268

City Chester	State IL	Zip Code 62233
-----------------	-------------	-------------------

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

Name of Employer Buena Vista National Bank	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2011

Transaction ID : SA11AI.6996

Amount of Each Receipt this Period

50.00

Travel Contribution

c. Mary Sulser
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 268

City Chester	State IL	Zip Code 62233
-----------------	-------------	-------------------

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

Name of Employer Buena Vista National Bank	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2011

Transaction ID : SA11AI.7011

Amount of Each Receipt this Period

50.00

Travel Contribution

SUBTOTAL of Receipts This Page (optional).....▶	172.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
	<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)
A. Mary Sulser

Mailing Address P.O. Box 268

City Chester State IL Zip Code 62233

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

Name of Employer Buena Vista National Bank Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : **SA11AI.7035**

Amount of Each Receipt this Period
50.00

Travel Contribution

Full Name (Last, First, Middle Initial)
B. Donald Tate

Mailing Address 806 N. Keller

City Effingham State IL Zip Code 62401

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

Name of Employer Crossroads Bank Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **381.42**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2011

Transaction ID : **SA11AI.6955**

Amount of Each Receipt this Period
99.90

Travel Contribution

Full Name (Last, First, Middle Initial)
C. Donald Tate

Mailing Address 806 N. Keller

City Effingham State IL Zip Code 62401

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

Name of Employer Crossroads Bank Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **479.32**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : **SA11AI.6995**

Amount of Each Receipt this Period
97.90

Travel Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ **247.80**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial) A. Donald Tate		Date of Receipt
Mailing Address 806 N. Keller		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
City	State	Zip Code
Effingham	IL	62401
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.7034
Crossroads Bank	SVP	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="581.62"/>	<input type="text" value="102.30"/>
<input type="checkbox"/> Other (specify) ▼		Travel Contribution

Full Name (Last, First, Middle Initial) B. Robert J. Wingert		Date of Receipt
Mailing Address 901 Community Drive		<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
City	State	Zip Code
Springfield	IL	62703
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.6922
Community Bankers Association of IL	President	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="358.38"/>	<input type="text" value="8.34"/>
<input type="checkbox"/> Other (specify) ▼		Contribution

Full Name (Last, First, Middle Initial) C. Robert J. Wingert		Date of Receipt
Mailing Address 901 Community Drive		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Springfield	IL	62703
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.6962
Community Bankers Association of IL	President	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="366.72"/>	<input type="text" value="8.34"/>
<input type="checkbox"/> Other (specify) ▼		Contribution

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="118.98"/>
TOTAL 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: (check only one)	PAGE 19 OF 27
	<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)
Community Bankers Association of Illinois FedPac

A. Robert J. Wingert
Full Name (Last, First, Middle Initial)

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

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

Name of Employer Community Bankers Association of IL Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.06**

Date of Receipt **09 / 30 / 2011**

Transaction ID : SA11AI.6978

Amount of Each Receipt this Period **8.34**

Contribution

B. Robert J. Wingert
Full Name (Last, First, Middle Initial)

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

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

Name of Employer Community Bankers Association of IL Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **383.40**

Date of Receipt **10 / 31 / 2011**

Transaction ID : SA11AI.7007

Amount of Each Receipt this Period **8.34**

Contribution

C. Robert J. Wingert
Full Name (Last, First, Middle Initial)

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

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

Name of Employer Community Bankers Association of IL Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **391.74**

Date of Receipt **11 / 30 / 2011**

Transaction ID : SA11AI.7024

Amount of Each Receipt this Period **8.34**

Contribution

SUBTOTAL of Receipts This Page (optional)..... **25.02**

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 20 OF 27
(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)
Community Bankers Association of Illinois FedPac

A. Robert J. Wingert
Full Name (Last, First, Middle Initial)

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

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

Name of Employer Community Bankers Association of IL Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : SA11AI.7044

Amount of Each Receipt this Period
 8.34

Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	8.34
TOTAL This Period (last page this line number only).....▶	3700.47

**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)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement Postage

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2011

Transaction ID : SB21B.6952

Amount of Each Disbursement this Period

1.76

Full Name (Last, First, Middle Initial)

B. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement Admin. Fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2011

Transaction ID : SB21B.6954

Amount of Each Disbursement this Period

273.00

Full Name (Last, First, Middle Initial)

C. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement Aug. Postage/Sept. Admin Fee

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2011

Transaction ID : SB21B.6984

Amount of Each Disbursement this Period

278.72

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

553.48

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)

<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)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
September Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2011

Transaction ID : SB21B.6987

Amount of Each Disbursement this Period

1.96

Full Name (Last, First, Middle Initial)

B. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
October Admin Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2011

Transaction ID : SB21B.6988

Amount of Each Disbursement this Period

273.00

Full Name (Last, First, Middle Initial)

C. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
Oct. Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2011

Transaction ID : SB21B.7009

Amount of Each Disbursement this Period

0.88

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

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

275.84

**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)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
Nov. Admin Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2011

Transaction ID : SB21B.7010

Amount of Each Disbursement this Period

273.00

Full Name (Last, First, Middle Initial)

B. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
November Postage

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2011

Transaction ID : SB21B.7046

Amount of Each Disbursement this Period

1.76

Full Name (Last, First, Middle Initial)

C. CBAI

Mailing Address 901 Community Drive

City Springfield State IL Zip Code 62703

Purpose of Disbursement
December Admin Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2011

Transaction ID : SB21B.7047

Amount of Each Disbursement this Period

273.00

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

547.76

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

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

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

FOR LINE NUMBER:
(check only one)

<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)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. Colombia Books Inc.

Mailing Address 8120 Woodmont Ave #110

City State Zip Code
Bethesda MD 20814-2743

Purpose of Disbursement
Schroeder CC - Staff Training

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2011

Transaction ID : SB21B.7049

Amount of Each Disbursement this Period

262.00

Full Name (Last, First, Middle Initial)

B. David Schroeder

Mailing Address 107 W Sheridan Place

City State Zip Code
Lake Bluff IL 60044

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2011

Transaction ID : SB21B.6985

Amount of Each Disbursement this Period

266.38

Full Name (Last, First, Middle Initial)

C. David Schroeder

Mailing Address 107 W Sheridan Place

City State Zip Code
Lake Bluff IL 60044

Purpose of Disbursement
Legislative Food and Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 28 / 2011

Transaction ID : SB21B.7053

Amount of Each Disbursement this Period

355.41

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

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

883.79

**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)

Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. The Westin Georgetown

Mailing Address 2350 M Street NW

City Washington State DC Zip Code 20037

Purpose of Disbursement Schroeder CC - Leg. Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2011

Transaction ID : SB21B.6948

Amount of Each Disbursement this Period

650.96

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement Schroeder CC - Leg. Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2011

Transaction ID : SB21B.6939

Amount of Each Disbursement this Period

320.40

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement Schroeder CC - LEg. Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2011

Transaction ID : SB21B.6940

Amount of Each Disbursement this Period

25.00

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

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

996.36

**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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Schroeder CC - Leg. Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2011

Transaction ID : SB21B.7048

Amount of Each Disbursement this Period

261.40

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

261.40

3518.63

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Community Bankers Association of Illinois FedPac

Full Name (Last, First, Middle Initial)

A. Citizens for Cook

Mailing Address PO Box 397

City State Zip Code
St. Libory IL 62282

Purpose of Disbursement
Event

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 14 / 2011

Transaction ID : SB23.7055

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SCHOCK FOR CONGRESS

Mailing Address PO Box 10555

City State Zip Code
Peoria IL 61612

Purpose of Disbursement
08/11/2011 Event

Candidate Name

SCHOCK FOR CONGRESS

Office Sought: House
 Senate
 President
State: IL District: 18

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 05 / 2011

Transaction ID : SB23.6936

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2750.00

2750.00