

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of IL

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Daniel M. Kaplan

Signature of Treasurer Electronically Filed by Daniel M. Kaplan Date 12 05 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

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

Write or Type Committee Name  
New Trier Democratic Organization

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		26372.33
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	21689.68									
(c) Total Receipts (from Line 19) .....	15151.48	70235.27								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	36841.16	96607.60								
7. Total Disbursements (from Line 31) .....	15837.11	75603.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21004.05	21004.05								
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  
New Trier Democratic Organization

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

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) .....	12261.00	53451.95
(ii) Unitemized .....	815.00	4885.36
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13076.00	58337.31
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	13076.00	58337.31
12. Transfers From Affiliated/Other Party Committees .....	250.00	550.00
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) .....	304.31	1377.24
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) .....	1521.17	9970.72
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	1521.17	9970.72
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	15151.48	70235.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13630.31	60264.55

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	683.29	4316.76
(ii) Non-Federal Share.....	2570.46	16219.26
(b) Other Federal Operating Expenditures.....	11132.71	31363.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	14386.46	51899.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	350.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	10000.00
24. Independent Expenditure (use Schedule E) .....	96.08	222.08
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	2581.35
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	1354.57	10550.28
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	1354.57	10550.28
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15837.11	75603.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13266.65	59384.29

**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) .....	13076.00	58337.31
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13076.00	58337.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11816.00	35680.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	304.31	1377.24
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11511.69	34303.34

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial)  
Lyle Banks

Mailing Address 1124 Merrill

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
ICNews CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2010

**Transaction ID:** SA11AI.7187

Amount of Each Receipt this Period  
300.00

NTD Annual Dinner Tickets

**B.**

Full Name (Last, First, Middle Initial)  
Bonita Canavan

Mailing Address 768 Foxdale

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
State of Illinois Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

**Transaction ID:** SA11AI.7166

Amount of Each Receipt this Period  
240.00

Silent auction purchase

**C.**

Full Name (Last, First, Middle Initial)  
Julie Chenevert

Mailing Address 816 Madison

City State Zip Code  
Evanston IL 60202

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

Name of Employer Occupation  
Chenevert Photography Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
MM / DD / YYYY  
10 / 17 / 2010

**Transaction ID:** SA11AI.7255

Amount of Each Receipt this Period  
380.00

In-kind - Photo shoot for silent auction

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **920.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial) Richard Doub		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 1500 Sheridan Rd.		<b>Transaction ID:</b> SA11AI.7185
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
Name of Employer retired	Occupation retired	Silent auction purchase
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00	

**B.**

Full Name (Last, First, Middle Initial) Aiden Duncan		Date of Receipt MM / DD / YYYY 10 / 17 / 2010
Mailing Address 1050 W. Waveland		<b>Transaction ID:</b> SA11AI.7260
City Chicago	State IL	Zip Code 60657
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Wrigley View Rooftop	Occupation Real Estate	In-kind - Cub tickets for silent auction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Francis Fruit		Date of Receipt MM / DD / YYYY 10 / 17 / 2010
Mailing Address 224 Green Bay Road		<b>Transaction ID:</b> SA11AI.7264
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 225.00
Name of Employer self	Occupation Photographer	In-kind - Digital photograph for silent auction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</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 8 / 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A.</b>	Full Name (Last, First, Middle Initial) Roberta Goldberg		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1580 Asbury		Transaction ID: SA11AI.7133
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer homemaker	Occupation homemaker	Sustaining Member
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Homer		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 1193 Terrace		Transaction ID: SA11AI.7188
	City Glencoe	State IL	Zip Code 60022
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer self	Occupation attorney	NTD Annual Dinner Tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Less than \$200 Individual		Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address		Transaction ID: SA11AI.7244
	City	State IL	Zip Code
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1611.00
	Name of Employer	Occupation	In-kind - Items & services less than \$200 for silent auction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3131.24	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2061.00
<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: PAGE 9 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3156.24

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

**Transaction ID:** SA11AI.7145

Amount of Each Receipt this Period  
25.00

Contributing Member

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3416.24

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

**Transaction ID:** SA11AI.7177

Amount of Each Receipt this Period  
260.00

Silent Auction Purchases < \$100

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3436.24

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

**Transaction ID:** SA11AI.7241

Amount of Each Receipt this Period  
20.00

Cash contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **305.00**

**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 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3756.24

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2010

**Transaction ID:** SA11AI.7181

Amount of Each Receipt this Period  
320.00

4 Contributing Members <\$-100 each

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3836.24

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2010

**Transaction ID:** SA11AI.7193

Amount of Each Receipt this Period  
80.00

Silent Auction Purchase

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

Mailing Address

City State Zip Code  
IL

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3886.24

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2010

**Transaction ID:** SA11AI.7194

Amount of Each Receipt this Period  
50.00

Contributing Member

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A.</b>	Full Name (Last, First, Middle Initial) Constantine Kanellos		Date of Receipt
	Mailing Address 3206 Greenleaf		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Wilmette	IL	60091
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7138
Name of Employer Kanellos & Associates		Occupation Attorney	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="1590.00"/>	<input type="text" value="300.00"/>
			NTD Annual Dinner

<b>B.</b>	Full Name (Last, First, Middle Initial) Harold Katz		Date of Receipt
	Mailing Address 425 Davis Street Unit 1116		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Evanston	IL	60201-4757
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7144
Name of Employer Katz, Friedman, Eagle, et al.		Occupation Attorney	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="300.00"/>	<input type="text" value="300.00"/>
			NTD Annual Dinner tickets

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Lauter		Date of Receipt
	Mailing Address 163 Timber Lane		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Glencoe	IL	60022
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7137
Name of Employer Freeborn & Peters, LLC		Occupation attorney	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="350.00"/>	<input type="text" value="350.00"/>
			NTD Annual Dinner Contrib- ution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="950.00"/>
<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: (check only one)	PAGE 12 / 34
	<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)  
New Trier Democratic Organization

<b>A.</b>	Full Name (Last, First, Middle Initial) Catherine MacCarthy		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 993 Old Green Bay Rd		<b>Transaction ID:</b> SA11AI.7183
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer homemaker	Occupation homemaker	Benefactor Membership
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dean Maragos		Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address 230 Church		<b>Transaction ID:</b> SA11AI.7249
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer self	Occupation attorney	In-kind - Cubs tickets for silent auction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jack Melamed		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 130 Westview		<b>Transaction ID:</b> SA11AI.7186
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer retired	Occupation physician	Silent auction purchase
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 765.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	840.00
<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: PAGE 13 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial)  
Lester Ordman

Mailing Address 120 Crescent

City State Zip Code  
Glencoe IL 60022

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

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 975.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 1 0

**Transaction ID:** SA11AI.7247

Amount of Each Receipt this Period  
250.00

In-kind - Bears Tickets for silent auction

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Pred

Mailing Address 1347 Sunview

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
Seneca Consulting consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1300.00

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

**Transaction ID:** SA11AI.7167

Amount of Each Receipt this Period  
700.00

Silent auction purchase

**C.**

Full Name (Last, First, Middle Initial)  
Merrilee Redmond

Mailing Address 564 Meadow Rd

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
Archdiocese of Chicago teacher

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 935.00

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

**Transaction ID:** SA11AI.7153

Amount of Each Receipt this Period  
210.00

Silent auction purchase

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1160.00**

**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 14 / 34  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.** Full Name (Last, First, Middle Initial)  
Bob Richman  
Mailing Address 859 Island Court  
City State Zip Code  
Deerfield IL 60015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00  
Date of Receipt 10 / 15 / 2010  
Transaction ID: SA11AI.7135  
Amount of Each Receipt this Period 425.00  
NTD Annual Dinner Tickets

**B.** Full Name (Last, First, Middle Initial)  
Bob Richman  
Mailing Address 859 Island Court  
City State Zip Code  
Deerfield IL 60015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 10 / 29 / 2010  
Transaction ID: SA11AI.7184  
Amount of Each Receipt this Period 175.00  
Silent auction purchase

**C.** Full Name (Last, First, Middle Initial)  
Trude Roselle  
Mailing Address 484 Rockefeller Rd  
City State Zip Code  
Lake Forest IL 60045  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation None  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1175.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: SA11AI.7165  
Amount of Each Receipt this Period 450.00  
Silent auction purchase

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00  
**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 15 / 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A.</b>	Full Name (Last, First, Middle Initial) Trude Roselle	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 484 Rockefeller Rd	<b>Transaction ID:</b> SA11AI.7191
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 215.00
	FEC ID number of contributing federal political committee. <b>C</b>	Silent Auction Purchase
Name of Employer Retired	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1390.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Ann Savard	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 802 Ashland	<b>Transaction ID:</b> SA11AI.7156
	City State Zip Code Wilmette IL 60091	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	Silent auction purchases
Name of Employer homemaker	Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lawrence Schad	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 120 Abingdon Road	<b>Transaction ID:</b> SA11AI.7180
	City State Zip Code Kenilworth IL 60043	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Sustaining Member Contribution
Name of Employer Schad, Diamond & Schedden	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1015.00
<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: PAGE 16 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial) Peggy Slater		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 560 Ash		<b>Transaction ID:</b> SA11AI.7154
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 375.00
Name of Employer State of Illinois	Occupation Child Welfare Administrator	Silent auction purchase
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1425.00	

**B.**

Full Name (Last, First, Middle Initial) Sanford Stein		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 300 N. LaSalle Street		<b>Transaction ID:</b> SA11AI.7143
City Chicago	State IL	Zip Code 60054
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Quarles & Brady	Occupation Attorney	NTD Annual Dinner Tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Larry Suffredin		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 2431 Pioneer Road		<b>Transaction ID:</b> SA11AI.7134
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer Cook County	Occupation Commissioner	Annual Dinner tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1880.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2175.00</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: PAGE 17 / 34  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial) Robert Zielinski		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 72 Warwick Rd		<b>Transaction ID:</b> SA11AI.7139
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Miller Canfield	Occupation attorney	Sustaining Member
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Robert Zielinski		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 72 Warwick Rd		<b>Transaction ID:</b> SA11AI.7155
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 135.00
Name of Employer Miller Canfield	Occupation attorney	Silent auction purchase
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

**C.**

Full Name (Last, First, Middle Initial) Robert Zielinski		Date of Receipt MM / DD / YYYY 10 / 22 / 2010
Mailing Address 72 Warwick Rd		<b>Transaction ID:</b> SA11AI.7160
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Miller Canfield	Occupation attorney	NTD Annual Dinner tickets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>735.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>12261.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 34
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A.</b>	Full Name (Last, First, Middle Initial) ILLINOIS TENTH CONGRESSIONAL DISTRICT DEMOCRATS		Date of Receipt
	Mailing Address 1345 FOREST AVE		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HIGHLAND PARK	IL	60035
	FEC ID number of contributing federal political committee.		Transaction ID: SA12.7150
	<input type="text" value="C00395889"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text" value="250.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Annual Dinner Contribution	
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	
Aggregate Year-to-Date ▼		<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="250.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 34
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

**A.**

Full Name (Last, First, Middle Initial) AT&T		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
Mailing Address Bill Payment Center		<b>Transaction ID:</b> SA15.7242
City Saginaw	State MI	Zip Code 48663
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 154.31
Name of Employer	Occupation	Refund of prior phone charge
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 877.28	

**B.**

Full Name (Last, First, Middle Initial) Chase Cards		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
Mailing Address PO Box 15153		<b>Transaction ID:</b> SA15.7236
City Wilmington	State DE	Zip Code 19886
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation	Chase Card Refund Program
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	304.31
<b>TOTAL</b> This Period (last page this line number only) .....	▶	304.31

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) ActBlue  Mailing Address 14 Arrow Street, Suite 11  City Cambridge State MA Zip Code 02138  Purpose of Disbursement Act Blue Fees 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.7132 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 81.97
B.	Full Name (Last, First, Middle Initial) ActBlue  Mailing Address 14 Arrow Street, Suite 11  City Cambridge State MA Zip Code 02138  Purpose of Disbursement Act Blue Fees 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.7151 Date of Disbursement 10 / 22 / 2010	Amount of Each Disbursement this Period 78.64
C.	Full Name (Last, First, Middle Initial) ActBlue  Mailing Address 14 Arrow Street, Suite 11  City Cambridge State MA Zip Code 02138  Purpose of Disbursement Act Blue Fees 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.7182 Date of Disbursement 10 / 29 / 2010	Amount of Each Disbursement this Period 13.24

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	173.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) ActBlue	Transaction ID: SB21B.7189 Date of Disbursement 11 / 08 / 2010
	Mailing Address 14 Arrow Street, Suite 11	Amount of Each Disbursement this Period 14.63
	City Cambridge State MA Zip Code 02138	
	Purpose of Disbursement Act Blue Fees Candidate Name	003 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) Chase Cards	Transaction ID: SB21B.7203 Date of Disbursement 10 / 26 / 2010
	Mailing Address PO Box 15153	Amount of Each Disbursement this Period 6527.52
	City Wilmington State DE Zip Code 19886	
	Purpose of Disbursement Chase Credit Card payment Candidate Name	003 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) Renaissance Hotel	Transaction ID: SB21B.7203.0 Date of Disbursement 10 / 26 / 2010
	Mailing Address 933 Skokie Blvd	Amount of Each Disbursement this Period 4542.42
	City Northbrook State IL Zip Code 60062	
	Purpose of Disbursement Annual dinner expense Candidate Name	003 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) ▼

[MEMO ITEM]

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

6542.15

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 22 / 34

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) North Shore Printers	Transaction ID: SB21B.7203.1 Date of Disbursement 10 / 26 / 2010
	Mailing Address 535 S Sheridan Rd	Amount of Each Disbursement this Period 1985.10
	City Waukegan State IL Zip Code 60085	
	Purpose of Disbursement Printing of annual dinner invitations	003 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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Chase Cards	Transaction ID: SB21B.7214 Date of Disbursement 10 / 26 / 2010
	Mailing Address PO Box 15153	Amount of Each Disbursement this Period 261.95
	City Wilmington State DE Zip Code 19886	
	Purpose of Disbursement Chase Credit Card Payment	001 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) AT&T	Transaction ID: SB21B.7214.1 Date of Disbursement 10 / 26 / 2010
	Mailing Address Bill Payment Center	Amount of Each Disbursement this Period 187.50
	City Saginaw State MI Zip Code 48663	
	Purpose of Disbursement Telephone expense	001 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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	261.95
<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)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) Julie Chenevert	Transaction ID: SB21B.7256 Date of Disbursement 10 / 17 / 2010
	Mailing Address 816 Madison	Amount of Each Disbursement this Period 380.00
	City Evanston State IL Zip Code 60202	
	Purpose of Disbursement In-kind - Photo shoot for silent auction	
	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) Aiden Duncan	Transaction ID: SB21B.7261 Date of Disbursement 10 / 17 / 2010
	Mailing Address 1050 W. Waveland	Amount of Each Disbursement this Period 300.00
	City Chicago State IL Zip Code 60657	
	Purpose of Disbursement In-kind - Cub tickets for silent auction	
	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) Francis Fruit	Transaction ID: SB21B.7265 Date of Disbursement 10 / 17 / 2010
	Mailing Address 224 Green Bay Road	Amount of Each Disbursement this Period 225.00
	City Winnetka State IL Zip Code 60093	
	Purpose of Disbursement In-kind - Digital photograph for silent auction	
	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) .....	▶	905.00
<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

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

NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<p><b>A.</b> Full Name (Last, First, Middle Initial) Less than \$200 Individual</p> <p>Mailing Address</p> <p>City State Zip Code IL</p> <p>Purpose of Disbursement In-kind - Items &amp; services less than \$200 for silent auction</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.7245</p> <p>Date of Disbursement 10 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1611.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dean Maragos</p> <p>Mailing Address 230 Church</p> <p>City State Zip Code Winnetka IL 60093</p> <p>Purpose of Disbursement In-kind - Cubs tickets for silent auction</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.7250</p> <p>Date of Disbursement 10 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nalani McClendon</p> <p>Mailing Address 628 Dundee Road</p> <p>City State Zip Code Glencoe IL 60022</p> <p>Purpose of Disbursement Office manager salary</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.7197</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 524.64</p>

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

2435.64

**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)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) Nalani McClendon	Transaction ID: SB21B.7198 Date of Disbursement 11 / 01 / 2010
	Mailing Address 628 Dundee Road	Amount of Each Disbursement this Period 246.42
	City Glencoe State IL Zip Code 60022	
	Purpose of Disbursement Office manager salary	001 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) Nalani McClendon	Transaction ID: SB21B.7199 Date of Disbursement 11 / 01 / 2010
	Mailing Address 628 Dundee Road	Amount of Each Disbursement this Period 290.21
	City Glencoe State IL Zip Code 60022	
	Purpose of Disbursement Office manager salary	001 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) Nalani McClendon	Transaction ID: SB21B.7234 Date of Disbursement 11 / 16 / 2010
	Mailing Address 628 Dundee Road	Amount of Each Disbursement this Period 27.49
	City Glencoe State IL Zip Code 60022	
	Purpose of Disbursement Reimbursement for office supplies	001 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) .....	564.12
<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)

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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)  
New Trier Democratic Organization

A.

Full Name (Last, First, Middle Initial)  
Lester Ordman

Transaction ID: SB21B.7248  
Date of Disbursement

Mailing Address 120 Crescent

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	0		1	7		2	0	1	0

City State Zip Code  
Glencoe IL 60022

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
In-kind - Bears Tickets for silent auction

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

250.00

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

11132.71

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB30B.7208
	Mailing Address Bill Payment Center	Date of Disbursement 10 / 26 / 2010
	City Saginaw State MI Zip Code 48663	Amount of Each Disbursement this Period 96.07
	Purpose of Disbursement 50% unallocated phone bank expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Haley Leibovitz	Transaction ID: SB30B.7195
	Mailing Address 1229 Brandywine Lane	Date of Disbursement 10 / 16 / 2010
	City Buffalo Grove State IL Zip Code 60089	Amount of Each Disbursement this Period 558.71
	Purpose of Disbursement Salary - Deputy Field Director	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Haley Leibovitz	Transaction ID: SB30B.7196
	Mailing Address 1229 Brandywine Lane	Date of Disbursement 11 / 01 / 2010
	City Buffalo Grove State IL Zip Code 60089	Amount of Each Disbursement this Period 558.71
	Purpose of Disbursement Salary - Deputy Field Director	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1213.49
<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)

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

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NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A.

Full Name (Last, First, Middle Initial)  
Winnetka Postmaster

Mailing Address 616 Chestnut

City Winnetka State IL Zip Code 60093

Purpose of Disbursement  
Postage for slate card mailing

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB30B.7201

Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

80.08

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

80.08

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

1293.57

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) New Trier Democratic Organization		FEC IDENTIFICATION NUMBER <b>C</b> C00422519	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee AT&T		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address Bill Payment Center		Amount 96.08	
City Saginaw		State MI	Zip Code 48663
Purpose of Expenditure 50% Allocation of ph- one bank to Alexi Gi- annoulas		Category/ Type 001	
Name of Federal Candidate supported or Opposed by expenditure: Alexander Giannoulas		Transaction ID: SE.7213	
		Office Sought: <input type="checkbox"/> House State: IL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
		96.08	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	96.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	96.08
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Daniel M. Kaplan Signature	Date M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 1 0

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Trier Democratic Organization

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
New Trier Democratic Organization	M M / D D / Y Y Y Y 10 / 18 / 2010	1521.17

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1521.17	Transaction ID: H3.7237
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	1521.17
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	1521.17

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

NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A. Full Name (Last, First, Middle Initial)</b> Chase Cards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15153			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">17352.27</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">001</div>	
Wilmington	DE	19886		
Purpose of Disbursement: Chase Credit Card			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">10 / 26 / 2010</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.7206	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.70		371.30		470.00

<b>B. Full Name (Last, First, Middle Initial)</b> Wilmette Park District			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3400 Glenview Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">001</div>	
Wilmette	ID	60091		
Purpose of Disbursement: Room Rental for Annual Meeting			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">10 / 26 / 2010</div>	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: H4.7207	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.70		371.30		470.00

<b>C. Full Name (Last, First, Middle Initial)</b> Schermerhorn & Co			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2737 Central Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">18517.27</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">001</div>	
Evanston	IL	60091		
Purpose of Disbursement: Office rent			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">11 / 01 / 2010</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.7219	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
343.35		1291.65		1635.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A. Full Name (Last, First, Middle Initial)</b> Jo Cohn Sawyer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 922 Forest			Allocated Activity or Event Year-To-Date 20016.02	
City Wilmette	State IL	Zip Code 60091	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Reimbursement for food expenses			Transaction ID: H4.7222	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
314.74		1184.01		1498.75

<b>B. Full Name (Last, First, Middle Initial)</b> Jewel Food			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1517 Sheridan Rd.			Allocated Activity or Event Year-To-Date 0.00	
City Wilmette	State IL	Zip Code 60091	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Election day food expense			Transaction ID: H4.7225	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.13		132.17		167.30

<b>C. Full Name (Last, First, Middle Initial)</b> Costco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Patriot Drive			Allocated Activity or Event Year-To-Date 0.00	
City Glenview	State IL	Zip Code 60025	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Food for election day			Transaction ID: H4.7226	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.29		625.58		791.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
314.74		1184.01		1498.75

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

<b>A. Full Name (Last, First, Middle Initial)</b> Caribou Coffee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 817 Elm			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City Winnetka	State IL	Zip Code 60093	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">10 / 30 / 2010</div>	
Purpose of Disbursement: Election day coffee			Transaction ID: H4.7227	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.43		340.21		430.64

<b>B. Full Name (Last, First, Middle Initial)</b> Garden Fresh Market			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 275 Skokie Boulevard			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City Northbrook	State IL	Zip Code 60062	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">11 / 01 / 2010</div>	
Purpose of Disbursement: Food for election day			Transaction ID: H4.7230	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.46		84.50		106.96

<b>C. Full Name (Last, First, Middle Initial)</b> Peggy Slater			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 560 Ash			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">20136.02</div>	
City Winnetka	State IL	Zip Code 60093	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> <div style="border: 1px solid black; display: inline-block; padding: 2px;">11 / 10 / 2010</div>	
Purpose of Disbursement: Reimbursement for office carpet cleaning			Transaction ID: H4.7232	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial)  
Cure, Inc.

Mailing Address  
7329 N. Honore

City	State	Zip Code	
Chicago	IL	60626	001

Purpose of Disbursement: Carpet Cleaning	Category/ Type
	001

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	1	0

Transaction ID: H4.7233

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
683.29	2570.46	3253.75