

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

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 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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 Year-End 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 M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of IL

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 18 / 2012 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2012

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 Daniel M. Kaplan *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 12 / 05 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

New Trier Democratic Organization

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="2012"/>		42889.60
(b) Cash on Hand at Beginning of Reporting Period.....	44751.48	
(c) Total Receipts (from Line 19)	2640.05	66701.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	47391.53	109591.49
7. Total Disbursements (from Line 31).....	18665.27	80865.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	28726.26	28726.26
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)	11289.65	

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)

Write or Type Committee Name

New Trier Democratic Organization

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).....	885.25	41988.08
(ii) Unitemized	641.00	8859.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1526.25	50847.58
(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)	1526.25	50847.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	775.00
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).....	275.00	790.44
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).....	838.80	14288.87
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	838.80	14288.87
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2640.05	66701.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1801.25	52413.02

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	6368.01	14215.26
(ii) Non-Federal Share.....	3376.26	18619.32
(b) Other Federal Operating Expenditures	3235.45	10657.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12979.72	43491.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	10513.66
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	4202.63
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	3185.55	22657.23
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	3185.55	22657.23
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18665.27	80865.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15289.01	62245.91

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)	1526.25	50847.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1526.25	50847.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9603.46	24872.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	275.00	790.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9328.46	24081.95

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

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

FOR LINE NUMBER: PAGE 6 OF 26
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for 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

Full Name (Last, First, Middle Initial)
A. Stella Black

Mailing Address 545 W Aldine, Apt. 2A

City	State	Zip Code
Chicago	IL	60657

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

Name of Employer	Occupation
Real Property Consultants, Inc	Real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2012

Transaction ID : SA11AI.8682

Amount of Each Receipt this Period
250.00

Dinner tickets

Full Name (Last, First, Middle Initial)
B. Obama signs & button Individuals, November 2012

Mailing Address 800 Oak Street

City	State	Zip Code
Winnetka	IL	60093

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.8700

Amount of Each Receipt this Period
60.00

Obama signs & buttons

Full Name (Last, First, Middle Initial)
c. Obama Signs&Buttons Individuals October

Mailing Address 800 Oak Street

City	State	Zip Code
Winnetka	IL	60093

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

Transaction ID : SA11AI.8680

Amount of Each Receipt this Period
100.00

Sale of Obama signs & buttons

SUBTOTAL of Receipts This Page (optional).....▶	410.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 26
(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

Full Name (Last, First, Middle Initial)
A. Obama Signs&Buttons Individuals October
 Mailing Address 800 Oak Street
 City Winnetka State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1655.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.8681
 Amount of Each Receipt this Period
 95.25
 Sale of Obama signs & buttons

Full Name (Last, First, Middle Initial)
B. Obama Signs&Buttons Individuals October
 Mailing Address 800 Oak Street
 City Winnetka State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1795.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012
Transaction ID : SA11AI.8684
 Amount of Each Receipt this Period
 140.00
 Sale of Obama signs & buttons

Full Name (Last, First, Middle Initial)
c. Obama Signs&Buttons Individuals October
 Mailing Address 800 Oak Street
 City Winnetka State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1895.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.8688
 Amount of Each Receipt this Period
 100.00
 Sale of Obama signs & buttons

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.25
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 8 OF 26
(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

Full Name (Last, First, Middle Initial)
A. Obama Signs&Buttons Individuals October

Mailing Address 800 Oak Street

City Winnetka State IL Zip Code 60093

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2035.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.8690

Amount of Each Receipt this Period
 140.00

Sale of Obama signs & buttons

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

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

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

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).....▶	140.00
TOTAL This Period (last page this line number only).....▶	885.25

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 26
(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

Full Name (Last, First, Middle Initial)
A. Chase Cards

Mailing Address PO Box 15153

City State Zip Code
Wilmington DE 19886

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
607.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA15.8726

Amount of Each Receipt this Period
100.00

Chase card rebate

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

Mailing Address PO Box 15153

City State Zip Code
Wilmington DE 19886

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
782.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA15.8707

Amount of Each Receipt this Period
175.00

Chase card rebate

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	275.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 14 Arrow Street, Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Processing fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8685

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address 14 Arrow Street, Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Processing fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8708

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address Bill Payment Center

City Saginaw State MI Zip Code 48663

Purpose of Disbursement
Office telephone bill

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8724

Amount of Each Disbursement this Period

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

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

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address Bill Payment Center

City State Zip Code
Saginaw MI 48663

Purpose of Disbursement
Phone bank for volunteers

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8725

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Siohban Burke

Mailing Address 435 Regency Court

City State Zip Code
Aurora IL 60504

Purpose of Disbursement
Expense reimbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8762

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Chase Cards

Mailing Address PO Box 15153

City State Zip Code
Wilmington DE 19886

Purpose of Disbursement
Chase Card Payment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8730

Amount of Each Disbursement this Period

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

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

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 2722 Green Bay Rd.

City State Zip Code
Evanston IL 60201

Purpose of Disbursement
Office supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.0

Amount of Each Disbursement this Period

59.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Wilmette Chamber of Commerce

Mailing Address 1150 Wilmette Ave.

City State Zip Code
Wilmette IL 60091

Purpose of Disbursement
Purchase new movein list

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.1

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CDW, Inc.

Mailing Address 26125 N Reiverwoods Blvd

City State Zip Code
Mettawa IL 60045

Purpose of Disbursement
Microsoft Access

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.2

Amount of Each Disbursement this Period

138.04

[MEMO ITEM]

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

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

0.00

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**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

Full Name (Last, First, Middle Initial)

A. TonerandInk Online

Mailing Address PO Box 6151

City Lindenhurst State IL Zip Code 60046

Purpose of Disbursement
Toner

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.3

Amount of Each Disbursement this Period

215.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. NGP Van, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Donor base software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.4

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Constant Contact

Mailing Address 1601 Trapelo Road
Suite 329

City Waltham State MA Zip Code 02541

Purpose of Disbursement
Internet email subscription service

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : SB21B.8730.7

Amount of Each Disbursement this Period

42.50

[MEMO ITEM]

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

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

0.00

--

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

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for 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

Full Name (Last, First, Middle Initial)

A. Dem Store.com

Mailing Address 5125 MacArthur N.W.--Suite 14

City Washington State DC Zip Code 20016

Purpose of Disbursement
Purchase of Obama signs & buttons

006
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2012

Transaction ID : SB21B.8721

Amount of Each Disbursement this Period

490.92

Full Name (Last, First, Middle Initial)

B. Agim Doko

Mailing Address 800 Oak Street

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
Carpet cleaning

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2012

Transaction ID : SB21B.8771

Amount of Each Disbursement this Period

229.00

Full Name (Last, First, Middle Initial)

C. North Shore Printers

Mailing Address 535 S Sheridan Rd

City Waukegan State IL Zip Code 60085

Purpose of Disbursement
Labels for name tags

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2012

Transaction ID : SB21B.8723

Amount of Each Disbursement this Period

317.20

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

1037.12

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

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**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

Full Name (Last, First, Middle Initial)

A. Wilmette Park District

Mailing Address 3400 Glenview Road

City Wilmette State ID Zip Code 60091

Purpose of Disbursement
Room rental for NTD annual meeting

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8753

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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 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)
New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. SCHNEIDER FOR CONGRESS

Mailing Address PO BOX 1318

City DEERFIELD State IL Zip Code 60015

Purpose of Disbursement
Primary contribution

011

Category/
Type

Candidate Name

BRADLEY SCOTT SCHNEIDER

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2012

Transaction ID : SB23.8718

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)..... ▶

2500.00

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Full Name (Last, First, Middle Initial)

A. Siohban Burke

Mailing Address 435 Regency Court

City Aurora State IL Zip Code 60504

Purpose of Disbursement
Net salary

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SB30B.8719

Amount of Each Disbursement this Period

1074.97

Full Name (Last, First, Middle Initial)

B. Siohban Burke

Mailing Address 435 Regency Court

City Aurora State IL Zip Code 60504

Purpose of Disbursement
Net salary

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : SB30B.8769

Amount of Each Disbursement this Period

662.71

Full Name (Last, First, Middle Initial)

C. Nalani McClendon

Mailing Address 628 Dundee Road

City Glencoe State IL Zip Code 60022

Purpose of Disbursement
Net salary - office manager

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SB30B.8720

Amount of Each Disbursement this Period

334.17

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

2071.85

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. Nalani McClendon

Mailing Address 628 Dundee Road

City State Zip Code
Glencoe IL 60022

Purpose of Disbursement
Net salary

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.8768

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. United States Treasury

Mailing Address P.O. Box 1269

City State Zip Code
Charlotte NC 28201-1269

Purpose of Disbursement
Withholding & payroll taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB30B.8775

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telephone & internet
Mailing Address Bill Payment Center	
City State Zip Code Saginaw MI 48663	

Outstanding Balance Beginning This Period <input type="text" value="328.05"/>	Transaction ID : SD10.8575	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="328.05"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Phone bill
Mailing Address Bill Payment Center	
City State Zip Code Saginaw MI 48663	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.8781	
Amount Incurred This Period <input type="text" value="353.69"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="353.69"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dem Store.com	Nature of Debt (Purpose): Obama signs, buttons & stickers
Mailing Address 5125 MacArthur N.W.--Suite 14	
City State Zip Code Washington DC 20016	

Outstanding Balance Beginning This Period <input type="text" value="490.92"/>	Transaction ID : SD10.8576	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="490.92"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="353.69"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jewel Food	Nature of Debt (Purpose): Food for annual meeting
Mailing Address 1517 Sheridan Rd.	
City State Zip Code Wilmette IL 60091	

Outstanding Balance Beginning This Period <input type="text" value="18.45"/>	Transaction ID : SD10.8749	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="18.45"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Van, Inc.	Nature of Debt (Purpose): Donor base software
Mailing Address 1101 15th Street, NW Suite 500	
City State Zip Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.8777	
Amount Incurred This Period <input type="text" value="250.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Shore Printers	Nature of Debt (Purpose): Annual dinner invitations, lables
Mailing Address 535 S Sheridan Rd	
City State Zip Code Waukegan IL 60085	

Outstanding Balance Beginning This Period <input type="text" value="3128.14"/>	Transaction ID : SD10.8574	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3128.14"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="250.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Shore Printers	Nature of Debt (Purpose): Printing of slate cards and envelopes
Mailing Address 535 S Sheridan Rd	
City State Zip Code Waukegan IL 60085	

Outstanding Balance Beginning This Period <input type="text" value="1104.38"/>	Transaction ID : SD10.8678	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1104.38"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Shore Printers	Nature of Debt (Purpose): Election mailing
Mailing Address 535 S Sheridan Rd	
City State Zip Code Waukegan IL 60085	

Outstanding Balance Beginning This Period <input type="text" value="2610.22"/>	Transaction ID : SD10.8677	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2610.22"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Shore Printers	Nature of Debt (Purpose): Slate card printing
Mailing Address 535 S Sheridan Rd	
City State Zip Code Waukegan IL 60085	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.8773	
Amount Incurred This Period <input type="text" value="1974.46"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1974.46"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5689.06"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Renaissance Hotel	Nature of Debt (Purpose): Annual dinner
Mailing Address 933 Skokie Blvd	
City State Zip Code Northbrook IL 60062	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.8772	
Amount Incurred This Period 4721.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 4721.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wilmette Park District	Nature of Debt (Purpose): Room rental for annual meeting
Mailing Address 3400 Glenview Road	
City State Zip Code Wilmette ID 60091	

Outstanding Balance Beginning This Period 225.00	Transaction ID : SD10.8748	
Amount Incurred This Period 0.00	Payment This Period 225.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Winnetka Chamber of Commerce	Nature of Debt (Purpose): Annual dues
Mailing Address 841 Spruce St.	
City State Zip Code Winnetka IL 60093	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.8780	
Amount Incurred This Period 275.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 275.00

1) SUBTOTALS This Period This Page (optional)..... ▶	4996.90
2) TOTALS This Period (last page this line number only)..... ▶	11289.65
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	11289.65

**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 New Trier Democratic Organization	DATE OF RECEIPT MM / DD / YYYY 11 / 02 / 2012	TOTAL AMOUNT TRANSFERRED 838.80
--	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	838.80
Transaction ID : H3.8774	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	838.80
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	838.80

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.8754 Schermerhorn & Co		Allocated Activity or Event: <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 _____ 20922.55	
City State Zip Code Evanston IL 60201	Category/ Type 001	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Office rent			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 326.20	_____ 838.80	_____ 1165.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.8760 Dean Maragos		Allocated Activity or Event: <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 230 Church		Allocated Activity or Event Year-To-Date _____ 22502.55	
City State Zip Code Winnetka IL 60093	Category/ Type 001	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Reimbursement for election eve party			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 442.40	_____ 1137.60	_____ 1580.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.8761 JP McCarthy's		Allocated Activity or Event: <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 509 4th Street		Allocated Activity or Event Year-To-Date _____ 0.00	
City State Zip Code Wilmette IL 60091	Category/ Type 001	Date <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Election eve party			
Activity or Event Identifier: Administrative [MEMO ITEM]			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 442.40	_____ 1137.60	_____ 1580.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 768.60		_____ 1976.40		_____ 2745.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.8717
Renaissance Hotel
Mailing Address 933 Skokie Blvd
City Northbrook State IL Zip Code 60062
Purpose of Disbursement: Room and meals for dinner
Activity or Event Identifier: **New Trier Annual Dinner(10/16/2011)**
[MEMO ITEM]

Allocated Activity or Event:
 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: 10 / 14 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3200.00		800.00		4000.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.8722
North Shore Printers
Mailing Address 535 S Sheridan Rd
City Waukegan State IL Zip Code 60085
Purpose of Disbursement: Printing of dinner invitations
Activity or Event Identifier: **New Trier Annual Dinner(10/16/2011)**

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

Allocated Activity or Event Year-To-Date: 9656.88
Date: 10 / 29 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2248.75		562.19		2810.94

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:

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

Allocated Activity or Event Year-To-Date:
Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2248.75		562.19		2810.94

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
6368.01		3376.26		9744.27