

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

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		115300.74
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	49212.66									
(c) Total Receipts (from Line 19)	132186.00	671434.11								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	181398.66	786734.85								
7. Total Disbursements (from Line 31)	177821.56	783157.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3577.10	3577.10								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

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)	34320.00	157390.00
(ii) Unitemized	35074.46	202548.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	69394.46	359938.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	79394.46	374938.88
12. Transfers From Affiliated/Other Party Committees	46564.00	144474.43
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	6227.54	152020.80
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	6227.54	152020.80
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	132186.00	671434.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	125958.46	519413.31

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.....	7320.40	67538.88
(ii) Non-Federal Share.....	27538.63	254074.19
(b) Other Federal Operating Expenditures.....	42892.77	188221.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	77751.80	509834.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(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	5000.00
29. Other Disbursements.....	0.00	147.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	100069.76	263176.33
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	100069.76	263176.33
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	177821.56	783157.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	150282.93	529083.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 72

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)	79394.46	374938.88
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79394.46	369938.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50213.17	255760.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50213.17	255760.23

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Illinois Republican Party
NAME OF ACCOUNT LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	20.00	140.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	20.00	140.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	200.00	320.00
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	200.00	320.00
10. DISBURSEMENTS..... <small>(From Line 6)</small>	20.00	140.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	180.00	180.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Louis Baker	Date of Receipt MM / DD / YYYY 07 / 22 / 2010
	Mailing Address 1481 W. Flint Ln.	Transaction ID: 00817.C319862
	City State Zip Code Romeoville IL 60446-5240	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.	Full Name (Last, First, Middle Initial) Gregory Buffington	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 1787B Glenwood Cir.	Transaction ID: 00720.C319779
	City State Zip Code Sugar Grove IL 60554-2017	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Layne-Western Co	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Roger Claar	Date of Receipt MM / DD / YYYY 07 / 19 / 2010
	Mailing Address 115 Concord Ln	Transaction ID: 00817.C319951
	City State Zip Code Bolingbrook IL 60440-1417	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Mayor	Occupation Village of Bolingbrook	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	810.00
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 8 / 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) John Conrad	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 703 Orchard Dr.	Transaction ID: 00715.C319383
	City State Zip Code Macomb IL 61455-1122	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Western Illinois University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Donald Couch	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 3035 Lake Bluff Dr	Transaction ID: 00715.C319395
	City State Zip Code Decatur IL 62521-4834	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self-Employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Donald Couch	Date of Receipt MM / DD / YYYY 07 / 21 / 2010
	Mailing Address 3035 Lake Bluff Dr	Transaction ID: 00817.C319921
	City State Zip Code Decatur IL 62521-4834	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Self-Employed	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 72
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Leanna Ehrhardt

Mailing Address 903 S McDougal Rd

City State Zip Code
Mahomet IL 61853-3516

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2010

Transaction ID: 00720.C319726

Amount of Each Receipt this Period
200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Clarence Gordon

Mailing Address 8329 Langley Ave., Apt. 2N

City State Zip Code
Chicago IL 60619-5855

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2010

Transaction ID: 00715.C319362

Amount of Each Receipt this Period
200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
William Graves

Mailing Address PO Box 950

City State Zip Code
Seneca IL 61360-0950

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2010

Transaction ID: 00715.C319426

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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 10 / 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Jon Hagstrom	Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 317 Hudson Ave.	Transaction ID: 00715.C319176
	City State Zip Code Clarendon Hills IL 60514-1331	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) William Hopper	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address P.O. Box 734	Transaction ID: 00720.C319752
	City State Zip Code Taylorville IL 62568	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer First Trust Bank	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Helen Kirkpatrick	Date of Receipt MM / DD / YYYY 07 / 07 / 2010
	Mailing Address 3124 Park Place	Transaction ID: 00715.C318880
	City State Zip Code Evanston IL 60201	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 170.00	

SUBTOTAL of Receipts This Page (optional)	1185.00
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 / 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Helen Kirkpatrick	Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 3124 Park Place	Transaction ID: 00715.C319314
	City State Zip Code Evanston IL 60201	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

B.	Full Name (Last, First, Middle Initial) Mike Klemm	Date of Receipt MM / DD / YYYY 07 / 13 / 2010
	Mailing Address 6500 Carlisle Bnd	Transaction ID: 00715.C319187
	City State Zip Code Springfield IL 62711-6794	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested Capitol City Speakers Bureau	Occupation Information Requested President	
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) Paul Langos	Date of Receipt MM / DD / YYYY 07 / 06 / 2010
	Mailing Address 7 Windsor Ct	Transaction ID: 00715.C318870
	City State Zip Code Barrington IL 60010-9594	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	335.00
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 12 / 72
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Douglas MacLeod

Mailing Address 1709 N. North Park

City State Zip Code
Chicago IL 60614-6374

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: 00715.C319083

Amount of Each Receipt this Period
50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Robert Malott

Mailing Address 200 E Randolph St

City State Zip Code
Chicago IL 60601-6436

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2010

Transaction ID: 00817.C319947

Amount of Each Receipt this Period
5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
David Milligan

Mailing Address 801 Interlaken Ln

City State Zip Code
Libertyville IL 60048-3802

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 13 / 2010

Transaction ID: 00715.C319348

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5350.00**

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 13 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

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

Mailing Address 801 Interlaken Ln

City State Zip Code
Libertyville IL 60048-3802

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
07 / 21 / 2010

Transaction ID: 00817.C319889

Amount of Each Receipt this Period 300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert E. Moore

Mailing Address 549 N Main St

City State Zip Code
Glen Ellyn IL 60137-5127

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
07 / 13 / 2010

Transaction ID: 00720.C319668

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 12334 S. Keeler Ave.

City State Zip Code
Alsip IL 60803-1813

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Morrison Security Corporation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y
07 / 07 / 2010

Transaction ID: 00720.C319791

Amount of Each Receipt this Period 300.00

Receipt

SUBTOTAL of Receipts This Page (optional) 850.00

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 / 72
(check only one)

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

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

Mailing Address 40434 N. Lake Shore Drive

City Antioch State IL Zip Code 60002-8583

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

Name of Employer A.J. Gallagher INC. Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 07 / 2010
Transaction ID: 00715.C318730
Amount of Each Receipt this Period 100.00
Receipt

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

Mailing Address 823 Archer Ln

City Elwood State IL Zip Code 60421-6044

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 06 / 2010
Transaction ID: 00715.C318520
Amount of Each Receipt this Period 100.00
Receipt

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

Mailing Address PO Box 32

City Lacon State IL Zip Code 61540-0032

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

Name of Employer American Bonanza Society Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 13 / 2010
Transaction ID: 00720.C319695
Amount of Each Receipt this Period 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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 15 / 72
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Linda Powers

Mailing Address 1323 W Pratt Blvd # 3

City Chicago State IL Zip Code 60626-4336

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

Name of Employer CNA Corp. Occupation Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 110.00

Date of Receipt 07 / 13 / 2010

Transaction ID: 00720.C319690

Amount of Each Receipt this Period 55.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Linda Powers

Mailing Address 1323 W Pratt Blvd # 3

City Chicago State IL Zip Code 60626-4336

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

Name of Employer CNA Corp. Occupation Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 160.00

Date of Receipt 07 / 13 / 2010

Transaction ID: 00720.C319689

Amount of Each Receipt this Period 50.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Linda Powers

Mailing Address 1323 W Pratt Blvd # 3

City Chicago State IL Zip Code 60626-4336

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

Name of Employer CNA Corp. Occupation Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 07 / 23 / 2010

Transaction ID: 00817.C319938

Amount of Each Receipt this Period 55.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 16 / 72
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Robert Prentice

Mailing Address 13343 Edinburgh Dr

City Palos Heights State IL Zip Code 60463-2749

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

Name of Employer Palm Rebar Co. Inc. Occupation Cardiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 07 / 2010

Transaction ID: 00720.C319775

Amount of Each Receipt this Period 300.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Hollis Rademacher

Mailing Address 1719 Lowell Ln.

City Lake Forest State IL Zip Code 60045-3784

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 13 / 2010

Transaction ID: 00720.C319724

Amount of Each Receipt this Period 200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Linda Rocheleau

Mailing Address 812 Alamosa Court

City Naperville State IL Zip Code 60565

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2010

Transaction ID: 00715.C319125

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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 17 / 72		
	<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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Robert Ryan		Date of Receipt
	Mailing Address 2026 N Newcastle Ave		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chicago	IL	60707-3332
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TransUnion LLC		Occupation VP Government Relations	Transaction ID: 00817.C320036
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
		<input type="text" value="300.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Robert Ryan		Date of Receipt
	Mailing Address 2026 N Newcastle Ave		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chicago	IL	60707-3332
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TransUnion LLC		Occupation VP Government Relations	Transaction ID: 00817.C320037
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="50.00"/>
		<input type="text" value="350.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Paul Smith		Date of Receipt
	Mailing Address 604 W. Stoughton St. Apt. 12		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Urbana	IL	61801-8807
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Smith Rentals		Occupation Owner	Transaction ID: 00817.C319879
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="100.00"/>
		<input type="text" value="250.00"/>	Receipt

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 72
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Marian Strand

Mailing Address 3825 Connecticut Dr

City State Zip Code
Rockford IL 61108-7646

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
07 / 27 / 2010

Transaction ID: 00817.C320012

Amount of Each Receipt this Period
110.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Richard Thomas

Mailing Address 82 Indian Hill Rd

City State Zip Code
Winnetka IL 60093-3935

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2010

Transaction ID: 00720.C319808

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Leonard Tobey

Mailing Address P.O. Box 588

City State Zip Code
Herscher IL 60941-0588

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

Name of Employer Self-Employed Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2010

Transaction ID: 00720.C319593

Amount of Each Receipt this Period
120.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2730.00**

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 19 / 72
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
John Tricou

Mailing Address 8333 Heather Ln

City State Zip Code
Tinley Park IL 60477-6568

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

Name of Employer Self-Employed Occupation RADILOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 21 / 2010

Transaction ID: 00817.C319925

Amount of Each Receipt this Period 10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Vincent Trosino

Mailing Address 23 Timberlake Rd.

City State Zip Code
Bloomington IL 61704

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 07 / 2010

Transaction ID: 00715.C318806

Amount of Each Receipt this Period 500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Wayne Waggoner

Mailing Address 1616 Cedar St # 19-D #19-D

City State Zip Code
Lawrenceville IL 62439-2154

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: 00715.C319547

Amount of Each Receipt this Period 50.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 10550.00

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 20 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Wayne Waggoner

Mailing Address 1616 Cedar St # 19-D
#19-D

City State Zip Code
Lawrenceville IL 62439-2154

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

Name of Employer Occupation
None Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
07 / 21 / 2010

Transaction ID: 00817.C319916

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 540 W Madison St Ste 2500
Suite 2500

City State Zip Code
Chicago IL 60661-2591

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

Name of Employer Occupation
DRW Trading Group CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2010

Transaction ID: 00817.C319949

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **10050.00**

TOTAL This Period (last page this line number only) ► **34320.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 72	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Mortgage Insurance Companies of America		Date of Receipt
	Mailing Address 1425 K St NW Ste 210		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20005-3590
	FEC ID number of contributing federal political committee.		Transaction ID: 00817.C319948
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="10000.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

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

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

FOR LINE NUMBER: PAGE 22 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First St., S.E.
City Washington State DC Zip Code 20003-1801
FEC ID number of contributing federal political committee. **C** C00003418
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 98151.43
Date of Receipt 07 / 01 / 2010
Transaction ID: 00820.C320056
Amount of Each Receipt this Period 241.00
Transfers From Affil./Auth.

B. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First St., S.E.
City Washington State DC Zip Code 20003-1801
FEC ID number of contributing federal political committee. **C** C00003418
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 143751.43
Date of Receipt 07 / 08 / 2010
Transaction ID: 00715.C319455
Amount of Each Receipt this Period 45600.00
Transfers From Affil./Auth.

C. Full Name (Last, First, Middle Initial)
Republican National Committee
Mailing Address 310 First St., S.E.
City Washington State DC Zip Code 20003-1801
FEC ID number of contributing federal political committee. **C** C00003418
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 144474.43
Date of Receipt 07 / 09 / 2010
Transaction ID: 00820.C320055
Amount of Each Receipt this Period 723.00
Transfers From Affil./Auth.

SUBTOTAL of Receipts This Page (optional) ► 46564.00
TOTAL This Period (last page this line number only) ► 46564.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) American Express Establishment Services Mailing Address P.O. Box 53852 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement Credit Card Processing 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: 00817.E23746 Date of Disbursement 07 / 01 / 2010
	Amount of Each Disbursement this Period 4.95 Category/Type CREDIT CARD PROCESSING

B. Full Name (Last, First, Middle Initial) American Express Establishment Services Mailing Address P.O. Box 53852 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement Credit Card Processing 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: 00817.E23818 Date of Disbursement 07 / 07 / 2010
	Amount of Each Disbursement this Period 27.75 Category/Type CREDIT CARD PROCESSING

C. Full Name (Last, First, Middle Initial) American Express Establishment Services Mailing Address P.O. Box 53852 City Phoenix State AZ Zip Code 85072- Purpose of Disbursement Credit Card Processing 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: 00817.E23819 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 15.50 Category/Type CREDIT CARD PROCESSING

SUBTOTAL of Disbursements This Page (optional) ▶	48.20
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

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

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Jonathan Blessing	Transaction ID: 00817.E23787 Date of Disbursement 07 / 27 / 2010
	Mailing Address 1518 N Sedgwick St Unit B City Chicago State IL Zip Code 60610-1223	Amount of Each Disbursement this Period 422.72
Purpose of Disbursement Travel & Meal Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		TRAVEL & MEAL REIMBURSEMENT
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Certy Merchant Relations	Transaction ID: 00817.E23747 Date of Disbursement 07 / 02 / 2010
	Mailing Address P.O. Box 30070 TA-02 City Tampa State FL Zip Code 33630-	Amount of Each Disbursement this Period 286.86
Purpose of Disbursement Credit Card Processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		CREDIT CARD PROCESSING
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Certy Merchant Relations	Transaction ID: 00817.E23749 Date of Disbursement 07 / 15 / 2010
	Mailing Address P.O. Box 30070 TA-02 City Tampa State FL Zip Code 33630-	Amount of Each Disbursement this Period 24.95
Purpose of Disbursement Credit Card Processing Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		CREDIT CARD PROCESSING FEES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	734.53
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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Certegy Merchant Relations Mailing Address P.O. Box 30070 TA-02 City Tampa State FL Zip Code 33630- Purpose of Disbursement Credit Card Processing Candidate Name	Transaction ID: 00817.E23820 Date of Disbursement 07 / 23 / 2010
	Amount of Each Disbursement this Period 3.10 Category/Type CREDIT CARD PROCESSING
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) Comcast Cable Mailing Address P.O. Box 3001 City Southeastern State PA Zip Code 19398- Purpose of Disbursement Cable Television Candidate Name	Transaction ID: 00817.E23757 Date of Disbursement 07 / 01 / 2010
	Amount of Each Disbursement this Period 508.60 Category/Type CABLE TELEVISION
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) Comcast Cable Mailing Address P.O. Box 3001 City Southeastern State PA Zip Code 19398- Purpose of Disbursement Cable Television Candidate Name	Transaction ID: 00817.E23780 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 431.33 Category/Type CABLE TELEVISION
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	943.03
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Comcast Cable	Transaction ID: 00817.E23783 Date of Disbursement 07 / 13 / 2010
	Mailing Address P.O. Box 3001	
	City Southeastern State PA Zip Code 19398-	Amount of Each Disbursement this Period 776.19
	Purpose of Disbursement Cable Television 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) ▼
		CABLE TELEVISION

B.	Full Name (Last, First, Middle Initial) Comcast Cable	Transaction ID: 00817.E23807 Date of Disbursement 07 / 27 / 2010
	Mailing Address P.O. Box 3001	
	City Southeastern State PA Zip Code 19398-	Amount of Each Disbursement this Period 201.38
	Purpose of Disbursement Cable Television 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) ▼
		CABLE TELEVISION

C.	Full Name (Last, First, Middle Initial) Comcast Cable	Transaction ID: 00817.E23809 Date of Disbursement 07 / 27 / 2010
	Mailing Address P.O. Box 3001	
	City Southeastern State PA Zip Code 19398-	Amount of Each Disbursement this Period 198.52
	Purpose of Disbursement Cable Television 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) ▼
		CABLE TELEVISION

SUBTOTAL of Disbursements This Page (optional)	1176.09
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 27 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Comcast Cable	Transaction ID: 00817.E23810 Date of Disbursement 07 / 27 / 2010
	Mailing Address P.O. Box 3001	
	City Southeastern State PA Zip Code 19398-	Amount of Each Disbursement this Period 642.84
	Purpose of Disbursement Cable Television 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) ▼
		CABLE TELEVISION

B.	Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 00817.E23692 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2704 Cronin Dr	
	City Springfield State IL Zip Code 62711-7083	Amount of Each Disbursement this Period 729.00
	Purpose of Disbursement Mileage Reimbursement 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) ▼
		MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Curt Conrad	Transaction ID: 00817.E23693 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2704 Cronin Dr	
	City Springfield State IL Zip Code 62711-7083	Amount of Each Disbursement this Period 902.00
	Purpose of Disbursement Travel Reimbursement 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) ▼
		TRAVEL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)	2273.84
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 28 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Curt Conrad

Transaction ID: 00817.E23752
Date of Disbursement

Mailing Address 2704 Cronin Dr

/ /

City Springfield State IL Zip Code 62711-7083

Amount of Each Disbursement this Period

Purpose of Disbursement
Office Doorbell Keys Golf Outing

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

OFFICE DOORBELL KEYS GOLF OUTING

B.

Full Name (Last, First, Middle Initial)
Curt Conrad

Transaction ID: 00817.E23722
Date of Disbursement

Mailing Address 2704 Cronin Dr

/ /

City Springfield State IL Zip Code 62711-7083

Amount of Each Disbursement this Period

Purpose of Disbursement
Mileage Reimbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

MILEAGE REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)
Curt Conrad

Transaction ID: 00817.E23721
Date of Disbursement

Mailing Address 2704 Cronin Dr

/ /

City Springfield State IL Zip Code 62711-7083

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Reimbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

TRAVEL REIMBURSEMENT

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)

PAGE 29 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) CSX Transportation	Transaction ID: 00817.E23718 Date of Disbursement 07 / 20 / 2010
	Mailing Address PO Box 44057	Amount of Each Disbursement this Period 1000.00
	City Jacksonville State FL Zip Code 32231-4057	
	Purpose of Disbursement Transportation 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) ▼
		TRANSPORTATION

B.	Full Name (Last, First, Middle Initial) DC Consulting	Transaction ID: 00817.E23789 Date of Disbursement 07 / 27 / 2010
	Mailing Address 25 W 306 Highview Drive	Amount of Each Disbursement this Period 261.00
	City Naperville State IL Zip Code 60563-	
	Purpose of Disbursement Office Supplies: Comp. Exp. Office 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) ▼
		OFFICE SUPPLIES: COMP. EXP. OFFICE

C.	Full Name (Last, First, Middle Initial) DC Consulting	Transaction ID: 00817.E23790 Date of Disbursement 07 / 27 / 2010
	Mailing Address 25 W 306 Highview Drive	Amount of Each Disbursement this Period 391.52
	City Naperville State IL Zip Code 60563-	
	Purpose of Disbursement Travel & Meal Reimbursement 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) ▼
		TRAVEL & MEAL REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)	▶	1652.52
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 30 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) T. Braxton Denton</p> <p>Mailing Address 2029 Carl Sandburg Ln. Apt 1</p> <p>City Springfield State IL Zip Code 62703-5491</p> <p>Purpose of Disbursement Travel & Meal Reimbursement</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>Transaction ID: 00817.E23764 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 186.12</p> <p>TRAVEL & MEAL REIMBURSEMENT</p>
<p>B. Full Name (Last, First, Middle Initial) T. Braxton Denton</p> <p>Mailing Address 2029 Carl Sandburg Ln. Apt 1</p> <p>City Springfield State IL Zip Code 62703-5491</p> <p>Purpose of Disbursement Office Supplies: Ink</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>Transaction ID: 00817.E23765 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 67.06</p> <p>OFFICE SUPPLIES: INK</p>
<p>C. Full Name (Last, First, Middle Initial) EDonation 1 Account</p> <p>Mailing Address 118 N. Saint Asaph St.</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement Party Fundraising Internet</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>Transaction ID: 00817.E23821 Date of Disbursement 07 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 7.17</p> <p>PARTY FUNDRAISING INTERNET</p>

SUBTOTAL of Disbursements This Page (optional) ▶

260.35

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)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) EDonation 1 Account</p> <p>Mailing Address 118 N. Saint Asaph St.</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement Party Fundraising Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23822</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="55.14"/></p> <p>PARTY FUNDRAISING INTERNET</p>
<p>B. Full Name (Last, First, Middle Initial) Anthony Esposito</p> <p>Mailing Address 1620 Hintz Ln Apt 2B Apt 2B</p> <p>City Wheeling State IL Zip Code 60090-5266</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23759</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1282.98"/></p> <p>TRAVEL REIMBURSEMENT</p>
<p>C. Full Name (Last, First, Middle Initial) FLS Connect, LLC</p> <p>Mailing Address 7300 Hudson Blvd N</p> <p>City Saint Paul State MN Zip Code 55128-7141</p> <p>Purpose of Disbursement Party Fundraising Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23683</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1705.20"/></p> <p>PARTY FUNDRAISING TELEMAR-KETING</p>

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)

PAGE 32 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Blvd N <hr/> City Saint Paul State MN Zip Code 55128-7141 <hr/> Purpose of Disbursement Party Fundraising Telemarketing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00817.E23682 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1699.05
	Category/ Type PARTY FUNDRAISING TELEMAR- KETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Blvd N <hr/> City Saint Paul State MN Zip Code 55128-7141 <hr/> Purpose of Disbursement Party Fundraising Telemarketing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00817.E23779 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 3883.53
	Category/ Type PARTY FUNDRAISING TELEMAR- KETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Blvd N <hr/> City Saint Paul State MN Zip Code 55128-7141 <hr/> Purpose of Disbursement Party Fundraising Telemarketing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00817.E23714 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 5394.90
	Category/ Type PARTY FUNDRAISING TELEMAR- KETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

10977.48

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 33 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect, LLC</p> <p>Mailing Address 7300 Hudson Blvd N</p> <p>City Saint Paul State MN Zip Code 55128-7141</p> <p>Purpose of Disbursement Party Fundraising Telemarketing</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>Transaction ID: 00817.E23717</p> <p>Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>PARTY FUNDRAISING TELEMAR- KETING</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect, LLC</p> <p>Mailing Address 7300 Hudson Blvd N</p> <p>City Saint Paul State MN Zip Code 55128-7141</p> <p>Purpose of Disbursement Party Fundraising Telemarketing</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>Transaction ID: 00817.E23713</p> <p>Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1737.05</p> <p>PARTY FUNDRAISING TELEMAR- KETING</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Andrew Griswold</p> <p>Mailing Address 536 W Fayette Ave</p> <p>City Springfield State IL Zip Code 62704-2735</p> <p>Purpose of Disbursement Meal Reimbursement</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>Transaction ID: 00817.E23795</p> <p>Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 527.52</p> <p>MEAL REIMBURSEMENT</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7264.57

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)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) Jerry King</p> <p>Mailing Address 9 Hickory St</p> <p>City Harrisburg State IL Zip Code 62946-3414</p> <p>Purpose of Disbursement Travel Reimbursement</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>Transaction ID: 00817.E23769 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 376.00</p> <p>Category/Type TRAVEL REIMBURSEMENT</p>
<p>B. Full Name (Last, First, Middle Initial) Bryan Kinsey</p> <p>Mailing Address 304 E Harrison Ave</p> <p>City Wheaton State IL Zip Code 60187-4204</p> <p>Purpose of Disbursement Office Stapler Markers Water</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>Transaction ID: 00817.E23728 Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 25.37</p> <p>Category/Type OFFICE STAPLER MARKERS WATER</p>
<p>C. Full Name (Last, First, Middle Initial) Bryan Kinsey</p> <p>Mailing Address 304 E Harrison Ave</p> <p>City Wheaton State IL Zip Code 60187-4204</p> <p>Purpose of Disbursement Mileage Reimbursement</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>Transaction ID: 00817.E23727 Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 44.00</p> <p>Category/Type MILEAGE REIMBURSEMENT</p>

SUBTOTAL of Disbursements This Page (optional)	445.37
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)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) Neopost</p> <p>Mailing Address P.O. Box 73740</p> <p>City Chicago State IL Zip Code 60673-</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23745</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="400.00"/></p> <p>POSTAGE</p>
<p>B. Full Name (Last, First, Middle Initial) Peapod Delivery</p> <p>Mailing Address 9933 Woods Drive</p> <p>City Skokie State IL Zip Code 60077-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23784</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="246.32"/></p> <p>OFFICE SUPPLIES</p>
<p>C. Full Name (Last, First, Middle Initial) PKL Consulting</p> <p>Mailing Address 611 Thornwood Ln</p> <p>City Northfield State IL Zip Code 60093-1135</p> <p>Purpose of Disbursement Party Fundraising Consulting Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00817.E23724</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>PARTY FUNDRAISING CONSULTING FEE</p>

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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Randy Pollard	Transaction ID: 00817.E23773 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2517 Mabry Ln	
	City Vandalia State IL Zip Code 62471-3710	Amount of Each Disbursement this Period 2054.57
	Purpose of Disbursement Travel Mileage Meal Reimbursement	
	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) ▼
		TRAVEL MILEAGE MEAL REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Randy Pollard	Transaction ID: 00817.E23774 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2517 Mabry Ln	
	City Vandalia State IL Zip Code 62471-3710	Amount of Each Disbursement this Period 137.43
	Purpose of Disbursement Office Supplies: Office Chairs	
	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) ▼
		OFFICE SUPPLIES: OFFICE CHAIRS

C.	Full Name (Last, First, Middle Initial) Cook County Republican Party	Transaction ID: 00817.E23781 Date of Disbursement 07 / 13 / 2010
	Mailing Address 10554 S. Roberts Road	
	City Palos Hills State IL Zip Code 60465-	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Rent	
	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) ▼
		RENT

SUBTOTAL of Disbursements This Page (optional)	3192.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 37 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Cook County Republican Party

Mailing Address 10554 S. Roberts Road

City Palos Hills State IL Zip Code 60465-

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00817.E23814

Date of Disbursement

07 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

RENT

B.

Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St., S.E.

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement
In Kind Transfer from RNC: Equip Trans

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00820.E23827

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

241.00

IN KIND TRANSFER FROM RNC:
EQUIP TRANS

C.

Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St., S.E.

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement
In Kind Transfer from RNC: Equip Trans

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00820.E23826

Date of Disbursement

07 / 09 / 2010

Amount of Each Disbursement this Period

723.00

IN KIND TRANSFER FROM RNC:
EQUIP TRANS

SUBTOTAL of Disbursements This Page (optional) ▶

1964.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23700 Date of Disbursement 07 / 11 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 140.00
	Purpose of Disbursement Mileage Reimbursement 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) ▼
		MILEAGE REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23699 Date of Disbursement 07 / 11 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 113.06
	Purpose of Disbursement Cell phone allowance meeting/office 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) ▼
		CELL PHONE ALLOWANCE MEETING/OFFIC

C.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23730 Date of Disbursement 07 / 20 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 115.00
	Purpose of Disbursement Mileage Reimbursement 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) ▼
		MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)	368.06
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23731 Date of Disbursement 07 / 27 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 29.62
	Purpose of Disbursement Travel Reimbursement	Category/ Type TRAVEL REIMBURSEMENT
	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) Tyler Sidell	Transaction ID: 00817.E23732 Date of Disbursement 07 / 27 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 106.95
	Purpose of Disbursement Office Color Copies Ink Beverages	Category/ Type OFFICE COLOR COPIES INK BEVERAGES
	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) United States Postal Service	Transaction ID: 00817.E23719 Date of Disbursement 07 / 20 / 2010
	Mailing Address 411 E Monroe	
	City Springfield State IL Zip Code 62701-	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Postage	Category/ Type POSTAGE
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1136.57
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 40 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Amanda Wears	Transaction ID: 00817.E23702 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2008 W. Warner Avenue 1 E	Amount of Each Disbursement this Period 160.49
	City Chicago State IL Zip Code 60618-3910	
	Purpose of Disbursement Travel Reimbursement	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) ▼
		TRAVEL REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Amanda Wears	Transaction ID: 00817.E23703 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2008 W. Warner Avenue 1 E	Amount of Each Disbursement this Period 145.00
	City Chicago State IL Zip Code 60618-3910	
	Purpose of Disbursement Mileage Reimbursement	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) ▼
		MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Amanda Wears	Transaction ID: 00817.E23735 Date of Disbursement 07 / 27 / 2010
	Mailing Address 2008 W. Warner Avenue 1 E	Amount of Each Disbursement this Period 81.02
	City Chicago State IL Zip Code 60618-3910	
	Purpose of Disbursement Flowers	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) ▼
		FLOWERS

SUBTOTAL of Disbursements This Page (optional)	386.51
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Amanda Wears	Transaction ID: 00817.E23734 Date of Disbursement 07 / 27 / 2010
	Mailing Address 2008 W. Warner Avenue 1 E	Amount of Each Disbursement this Period 111.00
	City Chicago State IL Zip Code 60618-3910	
	Purpose of Disbursement Travel Reimbursement	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) ▼
		TRAVEL REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Joe Weiss	Transaction ID: 00817.E23705 Date of Disbursement 07 / 11 / 2010
	Mailing Address 1683 Constitution Dr	Amount of Each Disbursement this Period 98.00
	City Glenview State IL Zip Code 60026-7705	
	Purpose of Disbursement Travel Reimbursement	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) ▼
		TRAVEL REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Joe Weiss	Transaction ID: 00817.E23751 Date of Disbursement 07 / 11 / 2010
	Mailing Address 1683 Constitution Dr	Amount of Each Disbursement this Period 1470.27
	City Glenview State IL Zip Code 60026-7705	
	Purpose of Disbursement Dell Office Computer	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) ▼
		DELL OFFICE COMPUTER

SUBTOTAL of Disbursements This Page (optional)	▶	1679.27
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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Joe Weiss

Transaction ID: 00817.E23750
Date of Disbursement

Mailing Address 1683 Constitution Dr

/ /

City State Zip Code
Glenview IL 60026-7705

Amount of Each Disbursement this Period

Purpose of Disbursement
Websites

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

WEBSITES

State: District:

B.

Full Name (Last, First, Middle Initial)
Joe Weiss

Transaction ID: 00817.E23737
Date of Disbursement

Mailing Address 1683 Constitution Dr

/ /

City State Zip Code
Glenview IL 60026-7705

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Reimbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

TRAVEL REIMBURSEMENT

State: District:

C.

Full Name (Last, First, Middle Initial)
Joe Weiss

Transaction ID: 00817.E23739
Date of Disbursement

Mailing Address 1683 Constitution Dr

/ /

City State Zip Code
Glenview IL 60026-7705

Amount of Each Disbursement this Period

Purpose of Disbursement
Websites

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

WEBSITES

State: District:

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)

PAGE 43 / 72

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

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Joe Weiss

Transaction ID: 00817.E23738
Date of Disbursement

Mailing Address 1683 Constitution Dr

07 / 27 / 2010

City State Zip Code
Glenview IL 60026-7705

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Mileage Reimbursement
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

42694.53

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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Jonathan Blessing

Mailing Address 1518 N Sedgwick St Unit B
Unit B

City Chicago State IL Zip Code 60610-1223

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00817.E23760
Date of Disbursement
07 / 11 / 2010

Amount of Each Disbursement this Period
2500.00

Category/Type

FEA CNSLTING: POLITICAL GRASSROOTS

B.

Full Name (Last, First, Middle Initial)
Jonathan Blessing

Mailing Address 1518 N Sedgwick St Unit B
Unit B

City Chicago State IL Zip Code 60610-1223

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00817.E23786
Date of Disbursement
07 / 27 / 2010

Amount of Each Disbursement this Period
2500.00

Category/Type

FEA CNSLTING: POLITICAL GRASSROOTS

C.

Full Name (Last, First, Middle Initial)
Jonathan Callaway

Mailing Address 504 N Beach Ave

City La Grange Park State IL Zip Code 60526-

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 00817.E23762
Date of Disbursement
07 / 11 / 2010

Amount of Each Disbursement this Period
500.00

Category/Type

FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ► 5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 72

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Jonathan Callaway	Transaction ID: 00817.E23791 Date of Disbursement 07 / 27 / 2010
	Mailing Address 504 N Beach Ave	Amount of Each Disbursement this Period 500.00
	City La Grange Park State IL Zip Code 60526-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

B.	Full Name (Last, First, Middle Initial) Capital Data Technologies LLC	Transaction ID: 00817.E23776 Date of Disbursement 07 / 11 / 2010
	Mailing Address 3109 Cascade Drive	Amount of Each Disbursement this Period 1500.00
	City Springfield State IL Zip Code 62704-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

C.	Full Name (Last, First, Middle Initial) Capital Data Technologies LLC	Transaction ID: 00817.E23803 Date of Disbursement 07 / 27 / 2010
	Mailing Address 3109 Cascade Drive	Amount of Each Disbursement this Period 1500.00
	City Springfield State IL Zip Code 62704-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) Kayleen Carlson</p> <p>Mailing Address 26304 N Middleton Pkwy</p> <p>City Mundelein State IL Zip Code 60060-9126</p> <p>Purpose of Disbursement FEA Cnslting: Political Grassroots</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>Transaction ID: 00817.E23792 Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type FEA CNSLTING: POLITICAL GRASSROOTS</p>
<p>B. Full Name (Last, First, Middle Initial) Curt Conrad</p> <p>Mailing Address 2704 Cronin Dr</p> <p>City Springfield State IL Zip Code 62711-7083</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 00817.E23691 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 3360.04</p> <p>Category/Type FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Curt Conrad</p> <p>Mailing Address 2704 Cronin Dr</p> <p>City Springfield State IL Zip Code 62711-7083</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 00817.E23720 Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 3360.05</p> <p>Category/Type FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)	8220.09
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 47 / 72

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Rodney Davis	Transaction ID: 00817.E23782 Date of Disbursement 07 / 13 / 2010
	Mailing Address 305 Beechwood Dr	Amount of Each Disbursement this Period 1973.35
	City Taylorville State IL Zip Code 62568-9601	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLITICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DC Consulting	Transaction ID: 00817.E23761 Date of Disbursement 07 / 11 / 2010
	Mailing Address 25 W 306 Highview Drive	Amount of Each Disbursement this Period 1750.00
	City Naperville State IL Zip Code 60563-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLITICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) DC Consulting	Transaction ID: 00817.E23788 Date of Disbursement 07 / 27 / 2010
	Mailing Address 25 W 306 Highview Drive	Amount of Each Disbursement this Period 1750.00
	City Naperville State IL Zip Code 60563-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLITICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	5473.35
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 48 / 72

<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)
Illinois Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) T. Braxton Denton</p> <p>Mailing Address 2029 Carl Sandburg Ln. Apt 1</p> <p>City Springfield State IL Zip Code 62703-5491</p> <p>Purpose of Disbursement FEA Cnslting: Political Grassroots</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>Transaction ID: 00817.E23763</p> <p>Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 900.00</p> <p>Category/Type</p> <p>FEA CNSLTING: POLITICAL GRASSROOTS</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) T. Braxton Denton</p> <p>Mailing Address 2029 Carl Sandburg Ln. Apt 1</p> <p>City Springfield State IL Zip Code 62703-5491</p> <p>Purpose of Disbursement FEA Cnslting: Political Grassroots</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>Transaction ID: 00817.E23793</p> <p>Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 900.00</p> <p>Category/Type</p> <p>FEA CNSLTING: POLITICAL GRASSROOTS</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Anthony Esposito</p> <p>Mailing Address 1620 Hintz Ln Apt 2B Apt 2B</p> <p>City Wheeling State IL Zip Code 60090-5266</p> <p>Purpose of Disbursement FEA Cnslting: Political Grassroots</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>Transaction ID: 00817.E23758</p> <p>Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1750.00</p> <p>Category/Type</p> <p>FEA CNSLTING: POLITICAL GRASSROOTS</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3550.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Anthony Esposito	Transaction ID: 00817.E23785 Date of Disbursement 07 / 27 / 2010
	Mailing Address 1620 Hintz Ln Apt 2B Apt 2B	Amount of Each Disbursement this Period 1750.00
	City Wheeling State IL Zip Code 60090-5266	
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

B.	Full Name (Last, First, Middle Initial) Andrew Griswold	Transaction ID: 00817.E23766 Date of Disbursement 07 / 11 / 2010
	Mailing Address 536 W Fayette Ave	Amount of Each Disbursement this Period 1500.00
	City Springfield State IL Zip Code 62704-2735	
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

C.	Full Name (Last, First, Middle Initial) Andrew Griswold	Transaction ID: 00817.E23794 Date of Disbursement 07 / 27 / 2010
	Mailing Address 536 W Fayette Ave	Amount of Each Disbursement this Period 1500.00
	City Springfield State IL Zip Code 62704-2735	
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	4750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) The Guardian	Transaction ID: 00817.E23748 Date of Disbursement 07 / 01 / 2010
	Mailing Address P.O. Box 8012	
	City Appleton State WI Zip Code 54913-8012	Amount of Each Disbursement this Period 5553.22
	Purpose of Disbursement FEA Health Insurance 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) ▼
		FEA HEALTH INSURANCE

B.	Full Name (Last, First, Middle Initial) Andria Hoffman	Transaction ID: 00817.E23767 Date of Disbursement 07 / 11 / 2010
	Mailing Address 5688 Rosos Pkwy	
	City Long Grove State IL Zip Code 60047-5063	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

C.	Full Name (Last, First, Middle Initial) Andria Hoffman	Transaction ID: 00817.E23796 Date of Disbursement 07 / 27 / 2010
	Mailing Address 5688 Rosos Pkwy	
	City Long Grove State IL Zip Code 60047-5063	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	▶	10553.22
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: 00817.E23755 Date of Disbursement
	Mailing Address P.O. Box 970010	<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City Saint Louis State MO Zip Code 63197-0010	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="2586.68"/>
	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) ▼
		FEA PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: 00817.E23756 Date of Disbursement
	Mailing Address P.O. Box 970010	<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Saint Louis State MO Zip Code 63197-0010	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="2586.62"/>
	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) ▼
		FEA PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Robert V. Johnson II	Transaction ID: 00817.E23816 Date of Disbursement
	Mailing Address 1733 Sequoia Trl	<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City Glenview State IL Zip Code 60025-2022	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Cnslting: Political Grassroots	<input type="text" value="1208.35"/>
	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6381.65"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 52 / 72

<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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Robert V. Johnson II

Mailing Address 1733 Sequoia Trl

City State Zip Code
Glenview IL 60025-2022

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00817.E23815
Date of Disbursement
07 / 27 / 2010

Amount of Each Disbursement this Period
1208.35

Category/Type
FEA CNSLTING: POLITICAL GRASSROOTS

B.

Full Name (Last, First, Middle Initial)
Jerry King

Mailing Address 9 Hickory St

City State Zip Code
Harrisburg IL 62946-3414

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00817.E23768
Date of Disbursement
07 / 11 / 2010

Amount of Each Disbursement this Period
1500.00

Category/Type
FEA CNSLTING: POLITICAL GRASSROOTS

C.

Full Name (Last, First, Middle Initial)
Jerry King

Mailing Address 9 Hickory St

City State Zip Code
Harrisburg IL 62946-3414

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00817.E23797
Date of Disbursement
07 / 27 / 2010

Amount of Each Disbursement this Period
1500.00

Category/Type
FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional) ► **4208.35**

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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Bryan Kinsey	Transaction ID: 00817.E23697 Date of Disbursement 07 / 11 / 2010
	Mailing Address 304 E Harrison Ave	Amount of Each Disbursement this Period 1500.00
	City Wheaton State IL Zip Code 60187-4204	
	Purpose of Disbursement FEA Payroll	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) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Bryan Kinsey	Transaction ID: 00817.E23726 Date of Disbursement 07 / 27 / 2010
	Mailing Address 304 E Harrison Ave	Amount of Each Disbursement this Period 1500.00
	City Wheaton State IL Zip Code 60187-4204	
	Purpose of Disbursement FEA Payroll	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) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Aaron Lawlor	Transaction ID: 00817.E23770 Date of Disbursement 07 / 11 / 2010
	Mailing Address 312 Russett Way	Amount of Each Disbursement this Period 1458.33
	City Vernon Hills State IL Zip Code 60061-1924	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	▶	4458.33
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Aaron Lawlor	Transaction ID: 00817.E23798 Date of Disbursement 07 / 27 / 2010
	Mailing Address 312 Russett Way	Amount of Each Disbursement this Period 1458.33
	City Vernon Hills State IL Zip Code 60061-1924	
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

B.	Full Name (Last, First, Middle Initial) Devin Meyer	Transaction ID: 00817.E23771 Date of Disbursement 07 / 11 / 2010
	Mailing Address 1 W Superior St Apt 3011 # 3011	Amount of Each Disbursement this Period 1292.00
	City Chicago State IL Zip Code 60654-8841	
	Purpose of Disbursement FEA Cnslting: Pollitical Grassroots 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) ▼
		FEA CNSLTING: POLLITICAL GRASSROOTS

C.	Full Name (Last, First, Middle Initial) Devin Meyer	Transaction ID: 00817.E23799 Date of Disbursement 07 / 27 / 2010
	Mailing Address 1 W Superior St Apt 3011 # 3011	Amount of Each Disbursement this Period 1292.00
	City Chicago State IL Zip Code 60654-8841	
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	4042.33
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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Randy Pollard	Transaction ID: 00817.E23772 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2517 Mabry Ln	
	City Vandalia State IL Zip Code 62471-3710	Amount of Each Disbursement this Period 2750.00
	Purpose of Disbursement FEA Cnslting: Polotical Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLOTICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Randy Pollard	Transaction ID: 00817.E23800 Date of Disbursement 07 / 27 / 2010
	Mailing Address 2517 Mabry Ln	
	City Vandalia State IL Zip Code 62471-3710	Amount of Each Disbursement this Period 2750.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLITICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Michael Rasmussen	Transaction ID: 00817.E23801 Date of Disbursement 07 / 27 / 2010
	Mailing Address 319 Bonnie Brae Lane	
	City Eureka State IL Zip Code 61530-	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA CNSLTING: POLITICAL GRASSROOTS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 56 / 72

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23698 Date of Disbursement 07 / 11 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 1375.00
	Purpose of Disbursement FEA Payroll 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) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Tyler Sidell	Transaction ID: 00817.E23729 Date of Disbursement 07 / 27 / 2010
	Mailing Address 109 Kay Ct	
	City East Peoria State IL Zip Code 61611-4511	Amount of Each Disbursement this Period 1375.00
	Purpose of Disbursement FEA Payroll 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) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Raymond Soch	Transaction ID: 00817.E23775 Date of Disbursement 07 / 11 / 2010
	Mailing Address 2132 Ruby St.	
	City Melrose Park State IL Zip Code 60164-	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots 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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
Raymond Soch

Transaction ID: 00817.E23802
Date of Disbursement

Mailing Address 2132 Ruby St.

/ /

City Melrose Park State IL Zip Code 60164-

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FEA CNSLTING: POLITICAL GRASSROOTS

State: District:

B.

Full Name (Last, First, Middle Initial)
Lance Trover

Transaction ID: 00817.E23777
Date of Disbursement

Mailing Address 616 N 5th St

/ /

City Vienna State IL Zip Code 62995-1633

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FEA CNSLTING: POLITICAL GRASSROOTS

State: District:

C.

Full Name (Last, First, Middle Initial)
Lance Trover

Transaction ID: 00817.E23804
Date of Disbursement

Mailing Address 616 N 5th St

/ /

City Vienna State IL Zip Code 62995-1633

Amount of Each Disbursement this Period

Purpose of Disbursement
FEA Cnslting: Political Grassroots

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FEA CNSLTING: POLITICAL GRASSROOTS

State: District:

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 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)
Illinois Republican Party

<p>A. Full Name (Last, First, Middle Initial) Amanda Wears</p> <p>Mailing Address 2008 W. Warner Avenue 1 E</p> <p>City Chicago State IL Zip Code 60618-3910</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 00817.E23701 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1732.17</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Amanda Wears</p> <p>Mailing Address 2008 W. Warner Avenue 1 E</p> <p>City Chicago State IL Zip Code 60618-3910</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 00817.E23733 Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1732.18</p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Joe Weiss</p> <p>Mailing Address 1683 Constitution Dr</p> <p>City Glenview State IL Zip Code 60026-7705</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 00817.E23704 Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1884.04</p> <p>FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5348.39

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 59 / 72

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Joe Weiss	Transaction ID: 00817.E23736 Date of Disbursement 07 / 27 / 2010
	Mailing Address 1683 Constitution Dr	Amount of Each Disbursement this Period 1884.05
	City Glenview State IL Zip Code 60026-7705	
	Purpose of Disbursement FEA Payroll	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) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Andrew Weissert	Transaction ID: 00817.E23805 Date of Disbursement 07 / 27 / 2010
	Mailing Address 2683 Stewart Avenue	Amount of Each Disbursement this Period 1200.00
	City Evanston State IL Zip Code 60201-	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

C.	Full Name (Last, First, Middle Initial) Mike Zolnierowicz	Transaction ID: 00817.E23778 Date of Disbursement 07 / 11 / 2010
	Mailing Address 3648 Venard Rd	Amount of Each Disbursement this Period 7000.00
	City Downers Grove State IL Zip Code 60515-1349	
	Purpose of Disbursement FEA Cnslting: Political Grassroots	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) ▼
		FEA CNSLTING: POLITICAL GRASSROOTS

SUBTOTAL of Disbursements This Page (optional)	▶	10084.05
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 60 / 72

<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)
Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) Mike Zolnierowicz		Transaction ID: 00817.E23806	
	Mailing Address 3648 Venard Rd		Date of Disbursement 07 / 27 / 2010	
	City Downers Grove	State IL	Zip Code 60515-1349	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement FEA Cnslting: Political Grassroots		Category/ Type	FEA CNSLTING: POLITICAL GRASSROOTS
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

100069.76

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

NAME OF COMMITTEE (In Full)
 Illinois Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Northern Trust No	M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 1 0	6227.54

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	6227.54	Transaction ID: H300817.C320054
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	6227.54
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)	6227.54

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

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Comcast Cable			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 P.O. Box 3001			Allocated Activity or Event Year-To-Date 295364.75		
City	State	Zip Code	Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Southeastern	PA	19398-			
Purpose of Disbursement: Cable Television			Transaction ID: H400817.E23674		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.13		90.77		114.90

B. Full Name (Last, First, Middle Initial) Vista Realty, Inc.			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 220 W. Carpenter St.			Allocated Activity or Event Year-To-Date 288354.04		
City	State	Zip Code	Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Springfield	IL	62702-			
Purpose of Disbursement: Rent			Transaction ID: H400817.E23675		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
336.00		1264.00		1600.00

C. Full Name (Last, First, Middle Initial) 205 Randolph Investors, LLC			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 205 W. Randolph			Allocated Activity or Event Year-To-Date 295249.85		
City	State	Zip Code	Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Chicago	IL	60606-			
Purpose of Disbursement: Rent			Transaction ID: H400817.E23676		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1013.86		3814.03		4827.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1373.99		5168.80		6542.79

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) AT&T			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 Bill Payment Center			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">289264.24</div>		
City Saginaw	State MI	Zip Code 48663-	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Telephone Service					
Activity or Event Identifier: ADMINISTRATION B 31			Date M M / D D / Y Y Y Y <div style="display: flex; justify-content: space-around; width: 100%;"> 07 / 01 / 2010 </div> Transaction ID: H400817.E23677		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.29		320.87		406.16

B. Full Name (Last, First, Middle Initial) AT&T			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 Bill Payment Center			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">289386.86</div>		
City Saginaw	State MI	Zip Code 48663-	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Telephone Service					
Activity or Event Identifier: ADMINISTRATION B 31			Date M M / D D / Y Y Y Y <div style="display: flex; justify-content: space-around; width: 100%;"> 07 / 01 / 2010 </div> Transaction ID: H400817.E23678		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.75		96.87		122.62

C. Full Name (Last, First, Middle Initial) City Water Light & Power			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 Municipal Center West			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">296030.13</div>		
City Springfield	State IL	Zip Code 62757-	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
Purpose of Disbursement: Utilities					
Activity or Event Identifier: ADMINISTRATION B 31			Date M M / D D / Y Y Y Y <div style="display: flex; justify-content: space-around; width: 100%;"> 07 / 01 / 2010 </div> Transaction ID: H400817.E23684		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.74		446.69		565.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
229.78		864.43		1094.21

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Quicksilver Mailing Services			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 1454			Allocated Activity or Event Year-To-Date 288858.08			
City	State	Zip Code	Category/ Type			
Springfield	IL	62705-1454				
Purpose of Disbursement: Generic Non-FEA NoCand Mail Service			Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>			
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23685			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
105.85			398.19			504.04

B. Full Name (Last, First, Middle Initial) Building Maintenance Services			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 3260 Northfield Dr.			Allocated Activity or Event Year-To-Date 290211.96			
City	State	Zip Code	Category/ Type			
Springfield	IL	62702-				
Purpose of Disbursement: Janitorial Service			Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>			
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23686			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
40.95			154.05			195.00

C. Full Name (Last, First, Middle Initial) Staples			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 P.O. Box 30292			Allocated Activity or Event Year-To-Date 290016.96			
City	State	Zip Code	Category/ Type			
Salt Lake City	UT	84130-				
Purpose of Disbursement: Office Supplies			Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>			
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23688			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
132.32			497.78			630.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.12		1050.02		1329.14

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Comcast Cable			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 P.O. Box 3001			Allocated Activity or Event Year-To-Date 295464.70		
City	State	Zip Code	Category/ Type		
Southeastern	PA	19398-			
Purpose of Disbursement: Cable Television			Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23689		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.99		78.96		99.95

B. Full Name (Last, First, Middle Initial) Watts Copy System			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 2860 Stanton Avenue			Allocated Activity or Event Year-To-Date 290421.96		
City	State	Zip Code	Category/ Type		
Springfield	IL	62708-			
Purpose of Disbursement: Copier Lease			Date <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23690		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10		165.90		210.00

C. Full Name (Last, First, Middle Initial) 415 Property Mgmt			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 415 West State Street 104			Allocated Activity or Event Year-To-Date 301030.13		
City	State	Zip Code	Category/ Type		
Geneva	IL	60134-			
Purpose of Disbursement: Rent			Date <input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 31			Transaction ID: H400817.E23695		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1115.09		4194.86		5309.95

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Mack Communications Mailing Address 1280 Iroquois Avenue Suite 406 City State Zip Code Naperville IL 60563- Purpose of Disbursement: Communications Cnslt. Activity or Event Identifier: ADMINISTRATION B 31	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 Allocated Activity or Event Year-To-Date 306060.53 Date <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2010"/> Transaction ID: H400817.E23696
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1050.00"/>		<input type="text" value="3950.00"/>		<input type="text" value="5000.00"/>

B. Full Name (Last, First, Middle Initial) Lake Area Disposal Services Mailing Address 2106 E. Cornell City State Zip Code Springfield IL 62703- Purpose of Disbursement: Waste Disposal Activity or Event Identifier: ADMINISTRATION B 31	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 Allocated Activity or Event Year-To-Date 306104.53 Date <input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2010"/> Transaction ID: H400817.E23707
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="9.24"/>		<input type="text" value="34.76"/>		<input type="text" value="44.00"/>

C. Full Name (Last, First, Middle Initial) Clifton Gunderson, LLP Mailing Address 1301 W 22nd St City State Zip Code Oak Brook IL 60523-2006 Purpose of Disbursement: Accounting Services Activity or Event Identifier: ADMINISTRATION B 31	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 Allocated Activity or Event Year-To-Date 313524.69 Date <input type="text" value="07"/> / <input type="text" value="14"/> / <input type="text" value="2010"/> Transaction ID: H400817.E23709
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1333.50"/>		<input type="text" value="5016.50"/>		<input type="text" value="6350.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2392.74"/>		<input type="text" value="9001.26"/>		<input type="text" value="11394.00"/>

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
<input type="text"/>		<input type="text"/>		<input type="text"/>

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

NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Comcast Cable

Mailing Address
P.O. Box 3001

City State Zip Code
Southeastern PA 19398-

Purpose of Disbursement:
Cable Television

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31

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

307125.34

Date 07 / 14 / 2010

Transaction ID: H400817.E23710

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.98		157.92		199.90

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

Mailing Address
P.O. Box 66826

City State Zip Code
Saint Louis MO 63166-

Purpose of Disbursement:
Utilities

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31

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

307174.69

Date 07 / 14 / 2010

Transaction ID: H400817.E23711

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.36		38.99		49.35

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

Mailing Address
P.O. Box 727

City State Zip Code
Memphis TN 38101-2112

Purpose of Disbursement:
Parcel Delivery

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 31

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

306679.70

Date 07 / 14 / 2010

Transaction ID: H400817.E23712

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
120.79		454.38		575.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.13		651.29		824.42

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Hanson Information Systems			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 2433 West White Oaks Dr.			Allocated Activity or Event Year-To-Date 306824.07		
City Springfield	State IL	Zip Code 62704-	Date M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 1 0		
Purpose of Disbursement: Internet Access			Transaction ID: H400817.E23715		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.32		114.05		144.37

B. Full Name (Last, First, Middle Initial) Comcast Cable			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 P.O. Box 3001			Allocated Activity or Event Year-To-Date 306925.44		
City Southeastern	State PA	Zip Code 19398-	Date M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 1 0		
Purpose of Disbursement: Cable Television			Transaction ID: H400817.E23716		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.29		80.08		101.37

C. Full Name (Last, First, Middle Initial) Mack Communications			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 1280 Iroquois Avenue Suite 406			Allocated Activity or Event Year-To-Date 321613.07		
City Naperville	State IL	Zip Code 60563-	Date M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 1 0		
Purpose of Disbursement: Communications Cnslt.			Transaction ID: H400817.E23725		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1101.61		4144.13		5245.74

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Advantage Payroll Services			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 1000 E Warrenville Rd			Allocated Activity or Event Year-To-Date 301060.53	
City Naperville	State IL	Zip Code 60563-1867	Date M M / D D / Y Y Y Y 07 / 11 / 2010	
Purpose of Disbursement: Payroll Service Fees				
Activity or Event Identifier: ADMINISTRATION B 31				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		24.02		30.40

B. Full Name (Last, First, Middle Initial) Advantage Payroll Services			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 1000 E Warrenville Rd			Allocated Activity or Event Year-To-Date 314113.07	
City Naperville	State IL	Zip Code 60563-1867	Date M M / D D / Y Y Y Y 07 / 27 / 2010	
Purpose of Disbursement: Payroll Service Fees				
Activity or Event Identifier: ADMINISTRATION B 31				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.36		31.44		39.80

C. Full Name (Last, First, Middle Initial) Korman/ Lederer Management 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 3100 Dundee Rd Ste 3100 Suite 3100			Allocated Activity or Event Year-To-Date 316013.07	
City Northbrook	State IL	Zip Code 60062-2437	Date M M / D D / Y Y Y Y 07 / 27 / 2010	
Purpose of Disbursement: Rent				
Activity or Event Identifier: ADMINISTRATION B 31				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.00		1501.00		1900.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
413.74		1556.46		1970.20

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Downers Grove Twp Rep. Organization

Mailing Address
137 Iris Rd

City	State	Zip Code
Darien	IL	60561-3966

Purpose of Disbursement:
Rent

Activity or Event Identifier:
ADMINISTRATION B 31

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
316613.07

Date 07 / 27 / 2010
Transaction ID: H400817.E23812

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

B. Full Name (Last, First, Middle Initial)
Citizens for Bill Brady

Mailing Address
PO Box 5314

City	State	Zip Code
Bloomington	IL	61702-5314

Purpose of Disbursement:
Rent

Activity or Event Identifier:
ADMINISTRATION B 31

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
314724.69

Date 07 / 27 / 2010
Transaction ID: H400817.E23813

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

C. Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Mailing Address
188 Industrial Dr., Ste. 430

City	State	Zip Code
Elmhurst	IL	60126-

Purpose of Disbursement:
Reimbursement: Insur.PolicyCoverage

Activity or Event Identifier:
ADMINISTRATION B 31

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
314073.27

Date 07 / 27 / 2010
Transaction ID: H400817.E23823

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-136.80		-514.62		-651.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
241.20		907.38		1148.58

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)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Illinois Republican Party

Mailing Address
Northern Trust Federal Acco 205 W. Randolph

City	State	Zip Code
Chicago	IL	60606-

Purpose of Disbursement:
Rembursement: Insur.PolicyCoverage

Category/ Type

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

-651.42

Activity or Event Identifier:
ADMINISTRATION B 31
[MEMO ITEM] Rembursement: Insur.PolicyCoverage

Date 07 / 27 / 2010

Transaction ID: H400817.E23824

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-136.80		-514.62		-651.42

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
7320.40	27538.63	34859.03

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 72 / 72
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) / Full Organization Name The Northern Trust Company	Transaction ID: 4B00817.E23825																					
	Date of Disbursement																					
Mailing Address 50 S La Salle St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	8		2	0	1	0													
City Chicago State IL Zip Code 60603-1006	Amount of Each Disbursement this Period																					
Purpose of Disbursement Service Fee	<table border="1"> <tr> <td colspan="8"></td> <td>20.00</td> </tr> </table>										20.00											
								20.00														
	Account: LEVIN																					

SUBTOTAL of Disbursements This Page (optional)	▶	<table border="1"><tr><td>20.00</td></tr></table>	20.00
20.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td>20.00</td></tr></table>	20.00
20.00			