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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines DuPage Medical Group LTD PAC 1 1 1 1 1 1100 West 31ST Street ADDRESS (number and street) Suite 300 Check if different than previously **Downers Grove** 60515 ΙĻ reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00435982 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2011 06 3 0 2011 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mary Goldsher Type or Print Name of Treasurer Electronically Filed by Mary Goldsher 07 29 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name DuPage Medical Group LTD PAC

FEC Form 3X (Rev. 02/2003)

_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
a) Cash on Hand January 1 2011		54509.87
b) Cash on Hand at Begining of Reporting Period	54509.87	
c) Total Receipts (from Line 19)	23800.52	23800.52
d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78310.39	78310.39
otal Disbursements (from Line 31)	5.00	5.00
eporting Period	78305.39	78305.39
e committee (Itemize all on	0.00	
e committee (Itemize all on	0.00	
	January 1 2011 Discontinuous period and segining of Reporting Period subtract Line 7 from Line 6(d)) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 6(d) and seporting Period subtract Line 7 from Line 8 from 8 from 8 from 8 fro	a) Cash on Hand January 1 201

For further information contact:

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

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

DuPage Medical Group LTD PAC

Report Covering the Period:

м м 0 1 From:

D D 1

2 0 1 1

м м 0 6

^D 3 0

Y Y Y 2011

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	11744.62	11744.62
(ii) Unitemized	12055.90	12055.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23800.52	23800.52
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	23800.52	23800.52
. Transfers From Affiliated/Other Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	23800.52	23800.52
Total Federal Receipts (subtract Line 18(c) from Line 19)	23800.52	23800.52

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A	COLUMN B
Operating Expenditures:	Total This Period	Calendar Year-to-Date
(a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	5.00	5.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	5.00	5.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	0.00	0.00
24. Independent Expenditure		
(use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
(use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
258.7 (opaymono mado		
7. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	2.22	
(i) Federal Share	0.00	0.00
	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds		
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22,		
	5.00	5.00
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	3.00
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	5.00	5.00
,		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	23800.52	23800.52
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	23800.52	23800.52
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5.00	5.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	5.00	5.00

FE6AN026

West Chicago IL 60185-3033 Amount of Each Receipt this Period	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Date of Receipt Name of Employer Durber of contributing C Cocupation	NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
City West Chicago IIL 60185-3033 FEC ID number of contributing federal political committee. Name of Employer Durage Medical Group, Ltd. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Craig Anderson Mailing Address 3 Briar Ln City West Chicago IIL 60185-3033 FEC ID number of contributing federal political committee. Craig Anderson Mailing Address 3 Briar Ln City State Zip Code IIL 60185-3033 FEC ID number of contributing federal political committee. C C May State Sign Code IIL 60185-3033 FEC ID number of contributing federal political committee. Name of Employer Durage Medical Group, Ltd. Name of Employer Occupation Physician Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Craig Anderson Mailing Address 3 Briar Ln City West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Craig Anderson	C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: D9EF755B9392DADF2C4 Amount of Each Receipt this Period 20.84 Date of Receipt M M M / D D / Y Y Y Y Y
Craig Anderson Mailing Address 3 Briar Ln City State Zip Code West Chicago IL 60185-3033 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: EF176BF99672D5B4838 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	Craig Anderson Mailing Address 3 Briar Ln City West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: BE05885DB9D2BC005B2 Amount of Each Receipt this Period
	SUBTOTAL of Receipts This Page (option	al)	62.52

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ - - 3.	Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct	State IL C Occupatio Physicial Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicial Aggregate		Transaction ID: 0A3A55BC49E5B6BE14E Amount of Each Receipt this Period 39.00
 :.	Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicial Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 4 1 4 2 0 1 1 Transaction ID: C7308B149DF6098ACDE Amount of Each Receipt this Period 39.00
	SUBTOTAL of Receipts This Page (optional)			117.00
1	FOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6365 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Y O 4 28 2011 Transaction ID: 367C9EEA37BD0C9ACC Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6365 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A58D0A38ABDE24EA885 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6365 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	•	117.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
λ.	Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn	State Zip Code IL 60137-6365	Date of Receipt M M
	FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 468.00	39.00
3.	Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	IL 60563-0132 C Occupation Physician	Amount of Each Receipt this Period 39.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	
•	Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir		Date of Receipt O 4 O 1 O 2 O 1 O 1
	City Naperville FEC ID number of contributing federal political committee.	State Zip Code IL 60563-0132 C	Transaction ID: 496ADEE36665687BFE Amount of Each Receipt this Period 39.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	468.00	
	SUBTOTAL of Receipts This Page (optional)		117.00
	TOTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-0132 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 0ECB47E1874B12F46B8 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-0132 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M Z B Z D 1 1 Transaction ID: AFB956DAEFB67B7365 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-0132 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-0132 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / 26 / 2011 Transaction ID: AD6C14A1AFC52569D5 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-0132 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 3621C5C0A6B4179FAE Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrews City Orland Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60462-4165 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M / 26 / 2011 Transaction ID: 8F13D1B505F3439EB8 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional)		98.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mary Connolly Mailing Address 15242 Saint Andrews City Orland Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60462-4165 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M M O 9 2 0 1 1 Transaction ID: 5ADAF7C611EE57AF75 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) David Dungan Mailing Address 211 Palamino PI City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-2046 C Occupation Physician Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M 26 2011 Transaction ID: DA61B0356D722D23873 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) David Dungan Mailing Address 211 Palamino PI City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-2046 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
SUBTOTAL of Receipts This Page (optional)		60.00

Naperville FEC ID number of contributing federal political committee. Name of Employer Durage Medical Group Naperville FEC ID number of contributing federal political committee. Receipt For: Primary General Other (specify) ▼ State Zip Code Naperville Naperville FEC ID number of contributing federal political committee. City State Zip Code Naperville FEC ID number of contributing federal political committee. Name of Employer Durage Medical Group Physician Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Amount of Each Receipt this Period Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Date of Receipt Malling Address 1207 Sanctuary Ln Date of Receipt Malling Address 1207 Sanctuary Ln	SCHEDULE A (FEITEMIZED RECEIP	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 101 (check only one) X 11a
Mailing Address 1207 Sanctuary Ln City Naperville IL G0540-1936 FEC ID number of contributing federal political committee. C Primary Orthor (specify) ▼ Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City Name of Employer Durage Medical Group Physician FEC ID number of contributing federal political committee. C Date of Receipt Aggregate Year-to-Date ▼ Primary General Orthor (specify) ▼ Aggregate Year-to-Date ▼ Primary General Orthor (specify) ▼ Date of Receipt Transaction ID: 7034DE16425DAED6263 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt this Period Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City State Zip Code Naperville IL G0540-1936 FEC ID number of contributing federal political committee. C C Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Transaction ID: S0FEEEBD181749DD0C Amount of Each Receipt this Period Amount of Ea	NAME OF COMMITTEE	(In Full)	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City State Zip Code Naperville IL 60540-1936 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ City State Zip Code IL 60540-1936 Amount of Each Receipt His Period Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt His Period Amount of Each Receipt His Period Amount of Each Receipt His Period Date of Receipt Transaction ID: C66AA68BF78E80A6BA Amount of Each Receipt His Period Amount of Each Receipt His Period Date of Receipt Transaction ID: 80FEEE8D181749DD0E Amount of Each Receipt His Period Date of Receipt Transaction ID: 80FEEE8D181749DD0E Amount of Each Receipt His Period Transaction ID: 80FEEE8D181749DD0E Amount of Each Receipt His Period Amount	Michael Fitzgerald Mailing Address 1207 City Naperville FEC ID number of contrib federal political committee Name of Employer DuPage Medical Group Receipt For: Primary G	Sanctuary Ln State IL uting Occupatio Physicia Aggregate	60540-1936 n n e Year-to-Date ▼ 468.00	Transaction ID: 7D34DE16425DAED6E34 Amount of Each Receipt this Period
Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City State Zip Code Naperville IL 60540-1936 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Michael Fitzgerald Mailing Address 1207 City Naperville FEC ID number of contrib federal political committee Name of Employer DuPage Medical Group Receipt For: Primary G	Sanctuary Ln State IL uting Occupation Physicia Aggregate	60540-1936 n n e Year-to-Date	Transaction ID: C66AA68BF78E80A6BAB Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	Michael Fitzgerald Mailing Address 1207 City Naperville FEC ID number of contrib federal political committee Name of Employer DuPage Medical Group Receipt For: Primary G	Sanctuary Ln State IL uting Occupation Physicia Aggregate	60540-1936 n n e Year-to-Date ▼	Transaction ID: 80FEEE8D181749DD0D8 Amount of Each Receipt this Period
	SUBTOTAL of Receipts Th	is Page (optional)		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group Receipt For: Primary General Other (specify)	State Zip Code IL 60540-1936 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group Receipt For: Primary General Other (specify)	State Zip Code IL 60540-1936 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group Receipt For: Primary General Other (specify)	State Zip Code IL 60540-1936 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / 26 / 2011 Transaction ID: 8FFB695047580A76654 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	117.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMI (check only one) X 11a 11	1b 11c 12
	information copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may name and add	y not be sold or used by any pers dress of any political committee to		
	Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City Naperville FEC ID number of contributing ederal political committee. Name of Employer DuPage Medical Group Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate	n Year-to-Date ▼ 468.00	0 6 Transaction I	ppt D 0 9
3. <u>.</u> N	Full Name (Last, First, Middle Initial) Juan Flores Mailing Address 65223 New Castle Rd. Dity Naperville FEC ID number of contributing ederal political committee.	State IL	Zip Code 60540	0 4 Transaction I	pt 2 8 2 0 1 1 D: C0D2115112448E51FC5 ich Receipt this Period 25.00
_	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate			
). <u>.</u> N	Full Name (Last, First, Middle Initial) Juan Flores Mailing Address 65223 New Castle Rd. City Naperville	State IL	Zip Code 60540	0 5 Transaction I	pt 2 2 0 1 1 2 2 0 1 1 1 2 0 1 1 1 1
f _	FEC ID number of contributing ederal political committee. Name of Employer DuPage Medical Group, Ltd.	Occupation			25.00
_	Receipt For: Primary General Other (specify)	Physician Aggregate	Year-to-Date ▼ 300.00		
SU	BTOTAL of Receipts This Page (optional)				89.00
то	TAL This Period (last page this line number of	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 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Juan Flores Mailing Address 65223 New Castle Ro City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M / D D D / Y Y Y Y Y Transaction ID: 3B531AFE8E94014EE1 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) Juan Flores Mailing Address 65223 New Castle Ro City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60516-2830 C Occupation Physician Aggregate Year-to-Date 600.00	Date of Receipt M M M / D D / Y Y Y Y Y Y O 3 2 0 1 1 Transaction ID: 91C3B7A14B18F070CD Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)		100.00

Downers Grove IL 60516-2830 FEC ID number of contributing federal political committee. So.00 So.00	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 1105 Adelia St City State Zip Code Downers Grove IL 60516-2830 FEC ID number of contributing federal political committee. Name of Employer Downers Grove IL 60516-2830 Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St C State Zip Code Downers Grove IL 60516-2830 Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St C State Zip Code IL 60516-2830 FEC ID number of contributing federal political committee. C State Zip Code IL 60516-2830 FEC ID number of contributing federal political committee. C State Zip Code Durage Medical Group, Ltd. Physician Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Physician Receipt For: Primary General Other (specify) ▼ State Zip Code IL 60516-2830 Date of Receipt Transaction ID: EGTCC1097A9E228 Amount of Each Receipt this Period Transaction ID: EGTC1097A9E228 Amount of Each Receipt this Period Date of Receipt Transaction ID: EGTC1097A9E228 Amount of Each Receipt this Period Date of Receipt Transaction ID: FGTD177C40E79A Date of Receipt Transaction ID: FGTD177C40E79A Amount of Each Receipt this Period Date of Receipt Transaction ID: FGTD177C40E79A Date of Receipt Transaction ID: FGTD177C40E79A Amount of Each Receipt this Period Transaction ID: FGTD177C6E70A Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C State Zip Code IL 60516-2830 FEC ID number of contributing federal political committee. C State Zip Code IL 60516-2830 Date of Receipt Transaction ID: FGTD177C40E70A Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼	NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Primary City State Zip Code IL 60516-2830 C	Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: EC7CC1C97A9BE280989 Amount of Each Receipt this Period
Thomas Gallagher Mailing Address 1105 Adelia St City State Zip Code Downers Grove IL 60516-2830 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	IL 60516-2830 C Occupation Physician Aggregate Year-to-Date ▼	M M M O 1 2 0 1 1 Transaction ID: 2F31F267C40EF99A6E5 Amount of Each Receipt this Period
150.00	Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	IL 60516-2830 C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: FE3D8D74CC6E06A800I Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional	al)	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	(crieck offly offe) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by ar	y person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	, , , ,	
Full Name (Last, First, Middle Initial) Thomas Gallagher		Date of Receipt
Mailing Address 1105 Adelia St		04 28 2011
City Downers Grove	State Zip Code IL 60516-2830	Transaction ID: 8692FD44ABB6147D31B Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St	-	Date of Receipt
City	State Zip Code	0 5 1 2 2 0 1 1 Transaction ID: 14E383197BD7902BF2C
Downers Grove	IL 60516-2830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.0	00
Full Name (Last, First, Middle Initial) Thomas Gallagher	L	Date of Receipt
Mailing Address 1105 Adelia St		05 26 Y Y Y Y Y Y
City Downers Grove	State Zip Code IL 60516-2830	Transaction ID: 0C3EDB6BEEBE9C42400 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.0	00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60516-2830 C Occupation Physician Aggregate Year-to-Date 600.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1466 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1466 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M O 1 Transaction ID: FAA7879E38C10C0FB2 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)		128.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	statements may not be sold or used by any persename and address of any political committee to	
A .	Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1466 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: A5A2EE7C28999C4E88 Amount of Each Receipt this Period 39.00
<u> —</u> В.	Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing	State Zip Code IL 60514-1466 C	Date of Receipt M M
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 468.00	
 C.	Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee.	State Zip Code IL 60514-1466	Date of Receipt M M
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 468.00	
s	SUBTOTAL of Receipts This Page (optional)	· ······	117.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1466 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Y Transaction ID: 61A3FABC8170F5B04F9 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Martin Gallo Mailing Address 118 Allen Ct City Clarendon Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60514-1466 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: B096C9FACFCBDFB05EI Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6130 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: C0A5C16E3BC36CA979E Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional))	116.46

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6130 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M O 1 2011 Transaction ID: B5C09A6BAF77AB8BA Amount of Each Receipt this Period 38.46
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6130 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-6130 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M Z B Z D 1 1 Transaction ID: 06CE88288A5F5B11BC Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional)		115.38

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee t	
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
և A .	Full Name (Last, First, Middle Initial) John Giardina			Date of Receipt
	Mailing Address 832 Abbey Dr			05 12 YYYY 2011
	City	State	Zip Code	Transaction ID: 4CF665954205933D702
	Glen Ellyn	<u>IL</u>	60137-6130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52	
В.	Full Name (Last, First, Middle Initial) John Giardina			Date of Receipt
	Mailing Address 832 Abbey Dr			05 26 2011
	City	State	Zip Code	Transaction ID: FAFA8CC01A748607B6
	Glen Ellyn	<u> L</u>	60137-6130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52	
- C.	Full Name (Last, First, Middle Initial) John Giardina			Date of Receipt
	Mailing Address 832 Abbey Dr			06 09 2011
	City	State	Zip Code	Transaction ID: F3A3B62B1202B36164B
	Glen Ellyn	<u> </u>	60137-6130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		461.52	
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}	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stewart Gibbs Mailing Address 226 N Clinton St #301 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60661-1198 C Occupation Director Aggregate Year-to-Date ▼ 230.76	Date of Receipt M M M / D D / Y Y Y Y Y O 5 2 6 2 0 1 1 Transaction ID: AFFEB96E572EE968F3 Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Stewart Gibbs Mailing Address 226 N Clinton St #301 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60661-1198 C Occupation Director Aggregate Year-to-Date 230.76	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 44274291FE6BB3A9EC Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Mary Goldsher Mailing Address 536 Mayfair Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-5387 C Occupation Chief Operating Officer Primary Care Aggregate Year-to-Date 240.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		58.46

	EDULE A (FEC Form 3X NIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one
or for c	formation copied from such Reports and commercial purposes, other than using ME OF COMMITTEE (In Full) Page Medical Group LTD PAC	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A. Mar Mai City Na FEC fede	Name (Last, First, Middle Initial) ry Goldsher ling Address 536 Mayfair Ln / perville C ID number of contributing eral political committee. me of Employer Page Medical Group, Ltd. ceipt For: Primary General Other (specify)	 	Zip Code 60565-5387 n erating Officer Primary Care e Year-to-Date 240.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
B. L. D. Mai	Name (Last, First, Middle Initial) Douglas Graham ling Address 15224 Summit Ave. Ste. 107 Akbrook Terrace C ID number of contributing eral political committee. The of Employer Page Medical Group, Ltd. Deept For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 5B7FC69B49A0BB1EC85 Amount of Each Receipt this Period 42.00
C. L. D. Mai	Name (Last, First, Middle Initial) Douglas Graham ling Address 15224 Summit Ave. Ste. 107 Akbrook Terrace C ID number of contributing eral political committee. me of Employer Page Medical Group, Ltd. ceipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	OTAL of Receipts This Page (optional		<u> </u>	104.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	statements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit Ave. Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181 C Occupation Physician Aggregate Year-to-Date 504.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit Ave. Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181 C Occupation Physician Aggregate Year-to-Date 504.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit Ave. Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181 C Occupation Physician Aggregate Year-to-Date 504.00	Date of Receipt M M Z B Z D 1 1 Transaction ID: FEC1DA3A9185B0EE50 Amount of Each Receipt this Period 42.00
SUBTOTAL of Receipts This Page (optional)	>	126.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 101 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAGE	s and Statements may not be sold or used by any pering the name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit A Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee.	State Zip Code IL 60181	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 504.00	
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit A Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	State Zip Code IL 60181 C Occupation Physician Aggregate Year-to-Date 504.00	Date of Receipt M M D D D 2 6 2 0 1 1
Full Name (Last, First, Middle Initial) L. Douglas Graham Mailing Address 15224 Summit A Ste. 107 City Oakbrook Terrace FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General		Date of Receipt M M M D D D Y Y Y Y Y Y Transaction ID: FA3997FDBA5974833DE Amount of Each Receipt this Period 42.00
	onal)umber only)	126.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	nd Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M O 3 O 3 2 0 1 1 Transaction ID: 62C9C35B8FED01CDE7 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (option	al)	300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	I Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M Z 8 Z 0 1 1 Transaction ID: C5959BA0AF7C425D52 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y O 5 1 2 2 0 1 1 Transaction ID: AD2BCBFB300509BE8F Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Linda Gruener Mailing Address 8207 Gruener Ct City Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60465-2200 C Occupation Physician Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: DB462926E54B8865F63 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		300.00

Mailing Address 8207 Gruener Ct City State Zip Code Palos Hills IL 60465-2200 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Anurag Gupta Mailing Address 6055 S Garfield Ave City State Zip Code IL 60527-5247 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Physician Receipt For: Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Name of Employer DuPage Medical Group, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	Date of Receipt M
A. Linda Gruener Mailing Address 8207 Gruener Ct City State Zip Code Palos Hills IL 60465-2200 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Anurag Gupta Mailing Address 6055 S Garfield Ave City State Zip Code Burr Ridge IL 60527-5247 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Name of Employer DuPage Medical Group, Ltd. Receipt For: Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	Transaction ID: 028832681B81A99E5BD Amount of Each Receipt this Period 100.00 Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Palos Hills FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Anurag Gupta Mailing Address 6055 S Garfield Ave City State Zip Code Burr Ridge IL 60527-5247 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Occupation Physician Receipt For: Primary General Occupation Physician Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	Amount of Each Receipt this Period 100.00 Date of Receipt M M M / D D / Y Y Y Y Y 0 1 1 Transaction ID: 8F66FDAFC55116595EE
Receipt For:	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
B. Anurag Gupta Mailing Address 6055 S Garfield Ave City State Zip Code Burr Ridge IL 60527-5247 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	0 1 0 6 2 0 1 1 Transaction ID: 8F66FDAFC55116595EE
Burr Ridge FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	Transaction ID: 8F66FDAFC55116595E
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Naira Hashmi Mailing Address 640 S Washington St	Amount of Each Receipt this Period 1000.00
C. Naira Hashmi Mailing Address 640 S Washington St	1000.00
Ste 268	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Naperville IL 60540-6694 FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 21.00
Name of Employer DuPage Medical Group, Ltd. Occupation Physician	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	252.00
SUBTOTAL of Receipts This Page (optional)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
۹.	Full Name (Last, First, Middle Initial) Naira Hashmi			Date of Receipt
	Mailing Address 640 S Washington St Ste 268			05 26 2011
	City	State	Zip Code	Transaction ID: 8B0F7A5D590EC41623
	<u>Naperville</u>	IL	60540-6694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
_ 3.	Full Name (Last, First, Middle Initial) Naira Hashmi			Date of Receipt
	Mailing Address 640 S Washington St Ste 268			06 09 7 2011
	City	State	Zip Code	Transaction ID: 15D96595A7A92CA5CD
	Naperville 550 12 10 10 10 10 10 10 10 10 10 10 10 10 10	<u>IL</u>	60540-6694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
_).	Full Name (Last, First, Middle Initial) Maleeha Hashmi-Basha			Date of Receipt
	Mailing Address 640 S Washington St Ste 268			05 26 7 2011
	City <u>Naperville</u>	State IL	Zip Code 60540-6694	Transaction ID: EB95B3712D0F9F674A
	FEC ID number of contributing federal political committee.	C	00340-0094	Amount of Each Receipt this Period 20.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For:	, ' ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		62.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 101 (check only one) X 11a
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements may name and add	not be sold or used by any pers ress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Maleeha Hashmi-Basha Mailing Address 640 S Washington St Ste 268 City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M M D D D D Z D 1 1 Transaction ID: 8A484CEC6D302D87171 Amount of Each Receipt this Period 20.00
В.	Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M M / D D M / Y Y Y Y Y Transaction ID: 42CAD1F667DB7DBCDF4 Amount of Each Receipt this Period 41.67
с.	Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate		Date of Receipt M M / D D / Y Y Y Y Y O 3 1 7 2 0 1 1 Transaction ID: FB2DE15B74AEBB8C6BA Amount of Each Receipt this Period 41.67
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			103.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 101 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
Full Name (Last, First, Middle Initial) James Hermann			Date of Receipt
Mailing Address 1962 Hampton Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: B9096C9F488B1B4DF94
Wheaton FEC ID number of contributing federal political committee.	C	60189-2020	Amount of Each Receipt this Period 41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) James Hermann	I		Date of Receipt
Mailing Address 1962 Hampton Dr			0 4
City Wheaton	State	Zip Code	Transaction ID: D12BDBE404D43777967
FEC ID number of contributing federal political committee.	C	60189-2020	Amount of Each Receipt this Period 41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) James Hermann			Date of Receipt
Mailing Address 1962 Hampton Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wheaton	State II	Zip Code 60189-2020	Transaction ID: DFCC73C9F69FAF0CF7 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00103 2020	41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.04	
			125.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-2020 C Occupation Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-2020 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / 26 / 2011 Transaction ID: B0C43D8C71187388DE Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-2020 C Occupation Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M O D D O D O D O D O D O D O D O D
SUBTOTAL of Receipts This Page (optional)		125.01

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	natements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago	State Zip Code IL 60610-6539	Date of Receipt 0 3 1 7 2 0 1 1 Transaction ID: 0C4455BF8E5456D6B7 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	C Occupation Physician Aggregate Year-to-Date ▼ 468.00	39.00
В.	Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt O 4 O 1 Transaction ID: F186AF62391AC8ADF0 Amount of Each Receipt this Period 39.00
_ C.	Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 6B390F5096F3B5F763C Amount of Each Receipt this Period 39.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M D D P 2 0 1 1
SUBTOTAL of Receipts This Page (optional) .	>	117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60610-6539 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 589AF0F2928B1839F60 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M O 1 Transaction ID: 99FCD16EC2289D57B4 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional) .		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 3C68DAFCB462B19A59 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 678078E6E273F1FEF9 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		117.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State IL C Occupation Physicia	n	Date of Receipt M M
_	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 468.00]
В.	Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln	Date of Receipt 0 6 0 9 2 0 1 1		
	City	State	Zip Code	Transaction ID: A181F842AA8FB4EBFF
	Bartlett	<u> </u>	60103-8939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 468.00	
с.	Full Name (Last, First, Middle Initial) Robert Janowitz			Date of Receipt
	Mailing Address 8401 Clynderven Rd	03 / 07 / 2011		
	City Burr Ridge	State IL	Zip Code 60527-6247	Transaction ID: 9A8A079998919974CA5 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00027 02-7	40.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00	
	SUBTOTAL of Receipts This Page (optional)			118.00
	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 41 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert Janowitz Mailing Address 8401 Clynderven Rd City Burr Ridge FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-6247 C Occupation Physician Aggregate Year-to-Date ▼ 480.00	Date of Receipt M M O 1
Full Name (Last, First, Middle Initial) Robert Janowitz Mailing Address 8401 Clynderven Rd City Burr Ridge FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-6247 C Occupation Physician Aggregate Year-to-Date 480.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robert Janowitz Mailing Address 8401 Clynderven Rd City Burr Ridge FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-6247 C Occupation Physician Aggregate Year-to-Date 480.00	Date of Receipt M M M / 28 / 2011 Transaction ID: D0C61E468799BB6924 Amount of Each Receipt this Period 40.00
SUBTOTAL of Receipts This Page (optional)		120.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 101 (check only one) X
NAME (OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	e Medical Group LTD PAC			
. Robert J				Date of Receipt
	Address 8401 Clynderven Rd			05 12 2011
City <u>Burr R</u> i	idge	State IL	Zip Code 60527-6247	Transaction ID: 46310BFC482344B9A0 Amount of Each Receipt this Period
	number of contributing political committee.	С		40.00
Name of DuPage	f Employer Medical Group, Ltd.	Occupation Physician		
	For: imary General ther (specify) ▼	, ' ' ' 	Year-to-Date ▼ 480.00	
Full Nan Robert J		I		Date of Receipt
Mailing /	Address 8401 Clynderven Rd	05 26 YYYY 2011		
City	City Burr Ridge		Zip Code	Transaction ID: 996EA2A5F26AEA9310
FEC ID	number of contributing political committee.	C	60527-6247	Amount of Each Receipt this Period 40.00
Name of DuPage	f Employer Medical Group, Ltd.	Occupation Physician		
	For: imary General ther (specify)	, ' ' 	Year-to-Date ▼ 480.00	
Full Nan Robert J	ne (Last, First, Middle Initial)			Date of Receipt
	Address 8401 Clynderven Rd			M M / D D / Y Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 269422621EE921B05A
	number of contributing political committee.	C	60527-6247	Amount of Each Receipt this Period 40.00
Name of DuPage	f Employer Medical Group, Ltd.	Occupation Physician		
Receipt		, ' '	Year-to-Date ▼ 480.00	
SUBTOTA	AL of Receipts This Page (optional)	1		120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert Kemp Mailing Address 3016 Seiler Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-4374 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M M / 26 2011 Transaction ID: F792D2F8B85FF880AF Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Robert Kemp Mailing Address 3016 Seiler Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-4374 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-3043 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		81.67

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City	Date of Receipt M M M		
	Naperville FEC ID number of contributing federal political committee.	State IL	Zip Code 60565-3043	Amount of Each Receipt this Period 41.67
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physicia Aggregate		
В.	Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct	Date of Receipt 0 4 0 1 2 0 1 1		
	City	State	Zip Code	Transaction ID: BB6E3C3C8B2DAA989A2
	Naperville	IL	60565-3043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer DuPage Medical Group, Ltd. Receipt For:	Occupation Physicia	n	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.04	
С.	Full Name (Last, First, Middle Initial) Robert King			Date of Receipt
	Mailing Address 2796 Crestfield Ct	04 14 2011		
	City <u>Naperville</u>	State IL	Zip Code 60565-3043	Transaction ID: E2843A7490464709E94 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.04	
	SUBTOTAL of Receipts This Page (optional)			125.01
	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 45 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-3043 C Occupation Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M / 28 / 2011 Transaction ID: 77F653631A63892396E Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-3043 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: FDAA2F7A7ABBEBEDE7 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-3043 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M / D D / Y Y Y Y Y O 5 2 6 2 0 1 1 Transaction ID: 609838BCCE7F25EADF0 Amount of Each Receipt this Period 41.67
SUBTOTAL of Receipts This Page (optional)		125.01

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert King Mailing Address 2796 Crestfield Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-3043 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Richard Krouse Mailing Address 4720 Lee Ave City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	State Zip Code IL 60515-3319 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Richard Krouse Mailing Address 4720 Lee Ave City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State Zip Code IL 60515-3319 C	Date of Receipt M M M / D D / Y Y Y Y Y O 6 0 9 2 0 1 1 Transaction ID: F2434F91C9E4D7A4D8 Amount of Each Receipt this Period 20.00
Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 240.00	81.67

Any informa			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
NAME (ation copied from such Reports and St nercial purposes, other than using the DF COMMITTEE (In Full) te Medical Group LTD PAC	atements may name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Norman Mailing City Glen E	Address 677 Duane St	State IL	Zip Code 60137-4611	Date of Receipt M M
Receipt	f Employer e Medical Group, Ltd. For: rimary General ther (specify) ▼	Occupation Physiciar Aggregate		
B. Norman	ne (Last, First, Middle Initial) Kumins Address 677 Duane St			Date of Receipt 0 4 0 1 2 0 1 1
City		State	Zip Code	Transaction ID: 686277601102DE6FC5F
	number of contributing political committee.	C	60137-4611	Amount of Each Receipt this Period 39.00
DuPage Receipt Pr	f Employer b Medical Group, Ltd. For: rimary	Occupation Physician Aggregate		
C. Norman	ne (Last, First, Middle Initial) Kumins Address 677 Duane St			Date of Receipt 0 4 1 4 2 0 1 1
City		State	Zip Code	Transaction ID: BDF7A507E14FFC137C
	Ellyn number of contributing political committee.	C	60137-4611	Amount of Each Receipt this Period 39.00
Name o DuPage	f Employer Medical Group, Ltd.	Occupation Physician		
	For: imary General ther (specify) ▼		Year-to-Date ▼ 468.00	
SUBTOTA	AL of Receipts This Page (optional)			117.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 101 (check only one) X 11a
•	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Norman Kumins Mailing Address 677 Duane St			Date of Receipt 0 4 2 8 2 0 1 1
	City Glen Ellyn	State IL	Zip Code 60137-4611	Transaction ID: 48FDC88E86854098BA0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 468.00	
В.	Full Name (Last, First, Middle Initial) Norman Kumins Mailing Address 677 Duane St			Date of Receipt 0 5 1 2 2 0 1 1
	City	State	Zip Code	Transaction ID: CBBA601044A7D6271B5
	Glen Ellyn	IL	60137-4611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 468.00	
С.	Full Name (Last, First, Middle Initial) Norman Kumins			Date of Receipt
	Mailing Address 677 Duane St	05 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 17B408F6A2843B4F71A
	Glen Ellyn FEC ID number of contributing federal political committee.	C	60137-4611	Amount of Each Receipt this Period 39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	. ' - '	e Year-to-Date ▼ 468.00	
	SUBTOTAL of Receipts This Page (optional)	1		117.00
	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 49 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Norman Kumins Mailing Address 677 Duane St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-4611 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D M 2 0 1 1 Transaction ID: 5051C0C2BD2C6A6270 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) David Labotka Mailing Address 1312 S Ridge Rd City Willowbrook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-1896 C Occupation Physician Aggregate Year-to-Date 249.96	Date of Receipt M M
Full Name (Last, First, Middle Initial) David Labotka Mailing Address 1312 S Ridge Rd City Willowbrook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-1896 C Occupation Physician Aggregate Year-to-Date 249.96	Date of Receipt M M M / 26 2011 Transaction ID: F57063C7C1880719EF1 Amount of Each Receipt this Period 20.83
SUBTOTAL of Receipts This Page (optional)		80.66

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the Coneck of Hy of let
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by e name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David Labotka Mailing Address 1312 S Ridge Rd City Willowbrook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60527-1896 C Occupation Physician Aggregate Year-to-Date 249	Date of Receipt M M M D D D 2 2 0 1 1 Transaction ID: FE61A09B1B262FEC40 Amount of Each Receipt this Period 20.83
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 480	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 486	Date of Receipt M M M / D D / Y Y Y Y Y O 1 2 0 1 1 Transaction ID: 6DA88C42CF8B0EA29A Amount of Each Receipt this Period 40.00
SUBTOTAL of Receipts This Page (optional)		100.83

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 101 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements may not be sold or used by any pers name and address of any political committee t	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 480.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: B18DDAC5E4CE4E3C Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 480.00	Date of Receipt M M M / D D / Y Y Y Y Y O 4 28 2011 Transaction ID: 30AE6326C05075D81 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date ▼ 480.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal ename and address of any political committee to	
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 480.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 34757EFB12F6545BD8 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Todd Lavigne Mailing Address 2034 W Walton St City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-4960 C Occupation Senior Director of IT Aggregate Year-to-Date 480.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: E60C603B4590868E26 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Aaron Lazar Mailing Address 1564 Abbotsford Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-2088 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M / 28 / 2011 Transaction ID: 88228116E887320324. Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 101 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal statements and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Aaron Lazar Mailing Address 1564 Abbotsford Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-2088 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Aaron Lazar Mailing Address 1564 Abbotsford Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-2088 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Aaron Lazar Mailing Address 1564 Abbotsford Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-2088 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 80D4AD63D49C914F6A Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Thomas Lee Mailing Address 385 Maple St City	State Zip Code	Date of Receipt M M D D C C C C
	Glen Ellyn FEC ID number of contributing federal political committee.	IL 60137-3811	Amount of Each Receipt this Period 20.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 240.00	
- 3.	Full Name (Last, First, Middle Initial) Thomas Lee Mailing Address 385 Maple St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City Glen Ellyn	State Zip Code IL 60137-3811	Transaction ID: 1F187848546867EFD7 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Occupation	20.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 240.00	
_	Full Name (Last, First, Middle Initial) Steve Lieberman		Date of Receipt
	Mailing Address 819 E Hillside Rd	State Zip Code	05 12 2011
	City Naperville	State Zip Code IL 60540-6806	Transaction ID: E14C29596A6F0A911 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	21.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)		61.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Steve Lieberman Mailing Address 819 E Hillside Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-6806 C Occupation Physician Aggregate Year-to-Date ▼ 252.00	Date of Receipt M M M / D D / Y Y Y Y Y O 5 2 6 2 0 1 1 Transaction ID: 4D37C341FECB8808C2 Amount of Each Receipt this Period 21.00
Full Name (Last, First, Middle Initial) Steve Lieberman Mailing Address 819 E Hillside Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-6806 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		81.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any pers he name and address of any political committee t	
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M D D D Y 2 0 1 1 Transaction ID: 1B17861887763FF0951 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 8FD980F104A8CA08D7 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ernest Lizek Mailing Address 416 S Sleight St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5441 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D M 2 0 1 1 Transaction ID: 29AAF1C6F64C75E898 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)	>	117.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	nd Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Nicholas Mataragas Mailing Address 6105 Timber Ridge City Indian Head Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Ct State Zip Code IL 60525-3759 C Occupation Surgeon Aggregate Year-to-Date ▼ 230.76	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: FFB469BFBA04AC47B5 Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Nicholas Mataragas Mailing Address 6105 Timber Ridge City Indian Head Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Ct State Zip Code IL 60525-3759 C Occupation Surgeon Aggregate Year-to-Date 230.76	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 90092838E635AA25DC6 Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Paul Merrick Mailing Address 540 Hill Ave City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-5032 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: C35B51C1162ECBA41A Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional	l)	58.46

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 101 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Δ.	Full Name (Last, First, Middle Initial) Paul Merrick Mailing Address 540 Hill Ave City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicia Aggregate		Date of Receipt M M M O 9 2011 Transaction ID: 11A0893ECE7537BE575 Amount of Each Receipt this Period 20.00
	Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicial Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 7 2 0 1 1 Transaction ID: 1C7080FBC6AFF2E3F8F Amount of Each Receipt this Period 39.00
	Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicial Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 1 2 0 1 1 Transaction ID: F53ACD571EE7ECCC9C Amount of Each Receipt this Period 39.00
	SUBTOTAL of Receipts This Page (optional)			98.00
	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 60 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4932 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4932 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 4DA80FD350ED97FE92 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4932 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 1 1 Transaction ID: 76F1CD7EEA378A89AE Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)		117.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may no name and addres	t be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Ye	Zip Code 60148-4932 ar-to-Date ▼ 468.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: B06E23BAC4E9C61C0EC Amount of Each Receipt this Period 39.00
В.	Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Ye	Zip Code 60148-4932 ar-to-Date ▼ 468.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 4FE3BC6E30EDC5CB90F Amount of Each Receipt this Period 39.00
C .	Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Ye	Zip Code 60181-7144 ar-to-Date ▼ 468.00	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 7 2 0 1 1 Transaction ID: EEC11E1810F9563CAA1 Amount of Each Receipt this Period 39.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of)	117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 90E9CE9A38B86E635D Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M Z B Z D 1 1 Transaction ID: 1BAA868522E0FBB717 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)		117.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	nd Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 8CC3B023510B69357B7 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / 26 / 2011 Transaction ID: 81E6E3F0EAB2F631040 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60181-7144 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 29FD3D0F79108CBBCE Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional	l)	117.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Keith Monson Mailing Address 612 Beaver Ct			Date of Receipt 0 3 0 3 2 0 1 1
	City <u>Naperville</u>	State IL	Zip Code 60563-9782	Transaction ID: B9A5BB92636E77D3F52 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		45.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Surgeon Aggregate		1
- В.	Full Name (Last, First, Middle Initial) Keith Monson Mailing Address 612 Beaver Ct	0 0		Date of Receipt
	City	State	Zip Code	0 3 1 7 2 0 1 1 Transaction ID: 0A1805942BFD974B6F1
	Naperville	IL	60563-9782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Surgeon		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
с. С.	Full Name (Last, First, Middle Initial) Keith Monson			Date of Receipt
	Mailing Address 612 Beaver Ct			04 01 2011
	City Naperville	State IL	Zip Code 60563-9782	Transaction ID: 77429271C17B0C9AC3I
	FEC ID number of contributing federal political committee.	C	00303-9702	Amount of Each Receipt this Period 45.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Surgeon		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
	SUBTOTAL of Receipts This Page (optional) .			135.00
ļ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee t	
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
∠ 4 .	Full Name (Last, First, Middle Initial) Keith Monson			Date of Receipt
	Mailing Address 612 Beaver Ct			04 / 14 / 2011
	City Naperville	State IL	Zip Code 60563-9782	Transaction ID: 577DE3231713BE622 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
 3.	Full Name (Last, First, Middle Initial) Keith Monson			Date of Receipt
	Mailing Address 612 Beaver Ct			$\begin{bmatrix} & M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City	State	Zip Code	Transaction ID: F76968CCDB0E3946
	Naperville	<u>IL</u>	60563-9782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		45.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	_ ' _ <u> </u>	e Year-to-Date ▼ 540.00	
_ :	Full Name (Last, First, Middle Initial) Keith Monson			Date of Receipt
-	Mailing Address 612 Beaver Ct			05 12 2011
	City	State	Zip Code	Transaction ID: 568C78C74094A0AD
	Naperville	<u>IL</u>	60563-9782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 540.00	
	SUBTOTAL of Receipts This Page (optional)	1		135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Keith Monson Mailing Address 612 Beaver Ct City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60563-9782 C Occupation Surgeon Aggregate Year-to-Date 540.00	Date of Receipt 0 5 26 2011 Transaction ID: E6E1E9EB5A726D019B Amount of Each Receipt this Period 45.00
- В.	Full Name (Last, First, Middle Initial) Keith Monson Mailing Address 612 Beaver Ct City Naperville	State Zip Code IL 60563-9782	Date of Receipt M M M / D D D / Y Y Y Y Y O 6 0 9 2 0 1 1 Transaction ID: 73B06838B5D7C95038
	FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Surgeon Aggregate Year-to-Date 540.00	Amount of Each Receipt this Period 45.00
- С.	Full Name (Last, First, Middle Initial) Mark Nelson Mailing Address 3753 King Williams C City Saint Charles FEC ID number of contributing federal political committee.	State Zip Code IL 60174-7806	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 240.00	
	SUBTOTAL of Receipts This Page (optional)		110.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 101 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	nd Statements may not be sold or used by any person the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mark Nelson Mailing Address 3753 King Williams		Date of Receipt 0 6 0 9 2 0 1 1
City Saint Charles FEC ID number of contributing	State Zip Code IL 60174-7806	Transaction ID: D093CA8A9988F5250 Amount of Each Receipt this Period
federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	C Occupation Physician Aggregate Year-to-Date ▼	20.00
Full Name (Last, First, Middle Initial) Ravi Nemivant Mailing Address 561 Hevern Dr		Date of Receipt 0 4 2 8 2 0 1 1
City	State Zip Code	Transaction ID: 94572FC897508EBB0
Wheaton	IL 60189-7396	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ravi Nemivant	-	Date of Receipt
Mailing Address 561 Hevern Dr		0 5 1 2 2 0 1 1
City Wheaton	State Zip Code IL 60189-7396	Transaction ID: 660BE5176B7423C61 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	J)	70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ravi Nemivant Mailing Address 561 Hevern Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-7396 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 0ADB62C554A6BFB64C Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) Ravi Nemivant Mailing Address 561 Hevern Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-7396 C Occupation Physician Aggregate Year-to-Date 300.00	Date of Receipt M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) Don Nichols Mailing Address 515 W Park Ave City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-6354 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / 26 / 2011 Transaction ID: 50029EEFE3BE8C60BE Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional) .	· · · · · · · · · · · · · · · · · · ·	70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 101 (check only one) X 11a 11b 11c 12 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Don Nichols Mailing Address 515 W Park Ave City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60189-6354 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brian O'Leary Mailing Address 401 59th St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60516-1440 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: EBC27457AD92E20608 Amount of Each Receipt this Period 21.00
Full Name (Last, First, Middle Initial) Brian O'Leary Mailing Address 401 59th St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60516-1440 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M M / 26 / 2011 Transaction ID: D93482EE7A00452B5D Amount of Each Receipt this Period 21.00
SUBTOTAL of Receipts This Page (optional)	•	62.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Brian O'Leary Mailing Address 401 59th St City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60516-1440 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 7CB0DBEC8BB11B192E Amount of Each Receipt this Period 21.00
Full Name (Last, First, Middle Initial) James Oakley Mailing Address 605 S Grant St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-4453 C Occupation Physician/Radiologist Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: BE5C0E952C0CD5C5C7 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) James Oakley Mailing Address 605 S Grant St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-4453 C Occupation Physician/Radiologist Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: CFBEBA21896A4A0866B Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numl		71.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Oakley Mailing Address 605 S Grant St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-4453 C Occupation Physician/Radiologist Aggregate Year-to-Date 300.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) James Oakley Mailing Address 605 S Grant St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-4453 C Occupation Physician/Radiologist Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: B1E0291E8F068275A4C Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) Michael Pacetti Mailing Address 16957 Burr Oak Dr City Homer Glen FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60491-6946 C Occupation Chief Financial Officer Aggregate Year-to-Date 240.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)	>	70.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael Pacetti Mailing Address 16957 Burr Oak Dr City Homer Glen FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60491-6946 C Occupation Chief Financial Officer Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: D5D40025BD66608AE2A Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 2C765EA04EED9460A02 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional) .	>	98.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 9FC60C199440980A8BE Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / 28 / 2011 Transaction ID: BC221166C287B412074 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 0D1E0DE67D48A5D38C Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional) .		117.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M D D 2 6 2 0 1 1
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60622-2245 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60187-3112 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M D D 2 0 1 1
SUBTOTAL of Receipts This Page (optional) .	>	99.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60187-3112 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M A 26 26 2011 Transaction ID: D968224CF118E98B9BF Amount of Each Receipt this Period 21.00
Full Name (Last, First, Middle Initial) Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60187-3112 C Occupation Physician Aggregate Year-to-Date 252.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) John Porcelli Mailing Address 1237 N Chicago Ave City Arlington Heights FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60004-4430 C Occupation Physician Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 90D16390D5445752B6A Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional) .	· · · · · · · · · · · · · · · · · · ·	62.00

City Arlington Heights IIL 60004-4430 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Full Name (Last, First, Middle Initial) Soujanya Pulluru Name of Employer IIL 60564-5915 Full Name (Last, First, Middle Initial) Soujanya Pulluru Name of Employer Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: A990104969D8I Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Transaction ID: 388612B872E9 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Amount of Each Receipt this Period Transaction ID: 388612B872E9 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Transaction ID: 388612B872E9 Amount of Each Receipt this Period And I Date of Receipt Transaction ID: 388612B872E9 Amount of Each Receipt this Period Date of Receipt Transaction ID: 388612B872E9 Amount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt this Period Transaction ID: A27F7FD93E05 Amount of Each Receipt this Period	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Date of Receipt Mailing Address 1237 N Chicago Ave	NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City State Zip Code Physician Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City State Zip Code Naperville IL 60564-5915 Date of Receipt Transaction ID: 38B612B872E9. Amount of Each Receipt this Period 41.6 Date of Receipt Transaction ID: A27F7FD93E05 Amount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: A27F7FD93E05 Amount of Each Receipt this Period Amount of Each Receipt this Period	John Porcelli Mailing Address 1237 N Chicago Ave City Arlington Heights FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date 240.00	M M / D D / Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City State Zip Code Naperville IL 60564-5915 FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	State Zip Code IL 60564-5915 C Occupation Physician	0 3 0 3 2 0 1 1 Transaction ID: 38B612B872E94FEC9F9
Receipt For: Aggregate Year-to-Date ▼ Primary General	Other (specify) ▼ Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee.	State Zip Code IL 60564-5915 C	0 3 1 7 2 0 1 1 Transaction ID: A27F7FD93E055279194
SUBTOTAL of Receipts This Page (optional)	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.04	103.34

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than use NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	s and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	Cir State Zip Code IL 60564-5915 C Occupation Physician	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone	Cir	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State Zip Code IL 60564-5915 C Occupation	Transaction ID: 13297383F3314E7B58B Amount of Each Receipt this Period 41.67
Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone	Cir	Date of Receipt 0 4 2 8 2 0 1 1
City Naperville FEC ID number of contributing federal political committee.	State Zip Code IL 60564-5915 C	Transaction ID: 815ADCFA13B9781563B Amount of Each Receipt this Period 41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (opt	onal)	125.01

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60564-5915 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60564-5915 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Soujanya Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60564-5915 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	125.01

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin Regan Mailing Address 31808 Village Green City Warrenville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60555-5923 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 7 2 0 1 1 Transaction ID: B0C16E0907C964DC765 Amount of Each Receipt this Period 38.46
Full Name (Last, First, Middle Initial) Kevin Regan Mailing Address 31808 Village Green City Warrenville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60555-5923 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M / D D / Y Y Y Y Y O 4
Full Name (Last, First, Middle Initial) Kevin Regan Mailing Address 31808 Village Green City Warrenville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60555-5923 C Occupation Physician Aggregate Year-to-Date 461.52	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: F484A23468B1C235F08 Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional)	115.38

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Kevin Regan Mailing Address 31808 Village Green C	t		Date of Receipt
	City Warrenville	State IL	Zip Code 60555-5923	Transaction ID: A390D913B19BCC95Cl Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	C	n	38.46
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Physicia		
-	Full Name (Last, First, Middle Initial) Kevin Regan Mailing Address 31808 Village Green C	t		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 51BD63B64791095F3E
	Warrenville	IL	60555-5923	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52]
	Full Name (Last, First, Middle Initial) Kevin Regan			Date of Receipt
	Mailing Address 31808 Village Green C	t		05 26 7 2011
	City	State	Zip Code	Transaction ID: BF4255DBC01BAE19F
	Warrenville FEC ID number of contributing federal political committee.	C	60555-5923	Amount of Each Receipt this Period 38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 461.52	
	SUBTOTAL of Receipts This Page (optional)			115.38

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 101 (check only one) X
(Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	
	DuPage Medical Group LTD PAC			
Α.	Full Name (Last, First, Middle Initial) Kevin Regan			Date of Receipt
	Mailing Address 31808 Village Green (Ct		06 09 2011
	City Warrenville	State IL	Zip Code 60555-5923	Transaction ID: DE9E6FAE2A5DC8DC0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Physicia		
	Receipt For: Primary General Other (specify) ▼	, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	e Year-to-Date ▼ 461.52	
_ В.	Full Name (Last, First, Middle Initial) Susan Ruzek	1		Date of Receipt
	Mailing Address 25164 Churchill Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 4C6ED1161EB00261096
	Glen Ellyn FEC ID number of contributing federal political committee.	C	60137	Amount of Each Receipt this Period 19.25
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Director	n	
	Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 231.00	
_ C.	Full Name (Last, First, Middle Initial) Susan Ruzek			Date of Receipt
	Mailing Address 25164 Churchill Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Glen Ellyn	State IL	Zip Code	Transaction ID: 5EA1E7475FAF25BD510
	FEC ID number of contributing federal political committee.	C	60137	Amount of Each Receipt this Period 19.25
	Name of Employer DuPage Medical Group, Ltd.	Occupatio Director	n	
	Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 231.00	
	SUBTOTAL of Receipts This Page (optional)	1		76.96

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 101 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St Apt. 202 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State Zip Code IL 60642-7500 C Occupation Physician	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 7 2 0 1 1 Transaction ID: 949846F5E9A0A2BFA8 Amount of Each Receipt this Period 39.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 468.00	
Yasser Said Mailing Address 914 W Hubbard St Apt. 202 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60642-7500 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 217EFE37B7C4A1C3AE Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St Apt. 202 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60642-7500 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		117.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any per- he name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St Apt. 202 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	State Zip Code IL 60642-7500 C Occupation Physician Aggregate Year-to-Date	Date of Receipt M M
Primary General Other (specify) Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St	468.00	Date of Receipt
Apt. 202 City Chicago	State Zip Code IL 60642-7500	Transaction ID: 55F9BBDD90A283552 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 468.00	39.00
Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St Apt. 202		Date of Receipt Date of Receipt 2 6 2 0 1 1
City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60642-7500 C	Amount of Each Receipt this Period 39.00
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 468.00	
SUBTOTAL of Receipts This Page (optional)		117.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate s for each categor Detailed Summ	ory of the (Check only only)
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or use the name and address of any politic	ed by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Yasser Said Mailing Address 914 W Hubbard St Apt. 202 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60642-7500 C Occupation Physician Aggregate Year-to-Date	Date of Receipt M M O D D Y Y Y Y Y Transaction ID: EFBF83394A6C7CD9C1 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Steven Schmitz Mailing Address 743 Godair Cir City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-8104 C Occupation Physician Aggregate Year-to-Date	Date of Receipt M M M / 26 / 2011 Transaction ID: C1EDE46AEC6FE793B4 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) Steven Schmitz Mailing Address 743 Godair Cir City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60521-8104 C Occupation Physician Aggregate Year-to-Date	Date of Receipt M M O O O O O O O O O O O O O O O O O
SUBTOTAL of Receipts This Page (optional)	79.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Grant Sievertsen Mailing Address 1304 Midwest Club F City Oak Brook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60523-2519 C Occupation Physician Aggregate Year-to-Date 230.76	Date of Receipt M
Full Name (Last, First, Middle Initial) Grant Sievertsen Mailing Address 1304 Midwest Club F City Oak Brook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60523-2519 C Occupation Physician Aggregate Year-to-Date 230.76	Date of Receipt M M M D D D 2 2 0 1 1 Transaction ID: 778CAAB02C66CB6E05 Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-4102 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M O 3 O 3 2 O 1 1 Transaction ID: 85C87F5F254CBA36A19 Amount of Each Receipt this Period 41.67
SUBTOTAL of Receipts This Page (optional)		80.13

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Glen Ellyn FEC ID number of contributing	State IL	Zip Code 60137-4102	Transaction ID: 3C31123B3A8AF426205 Amount of Each Receipt this Period
	federal political committee.	Occupatio	on .	41.67
	Name of Employer DuPage Medical Group, Ltd. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Physicia		
- В.	Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd			Date of Receipt 0 4 0 1 2 0 1 1
	City	State	Zip Code	Transaction ID: F5E96B3EE944686B4E
	Glen Ellyn FEC ID number of contributing federal political committee.	C	60137-4102	Amount of Each Receipt this Period 41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.04	
- C.	Full Name (Last, First, Middle Initial) Amy Stoeffler			Date of Receipt
	Mailing Address 532 Deerpath Rd			0 4
	City Glen Ellyn	State IL	Zip Code 60137-4102	Transaction ID: C37BACF08740E867F8 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.04	
	SUBTOTAL of Receipts This Page (optional)			125.01
f	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 87 / 101 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may not be sold or used by any personame and address of any political committee to	
Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-4102 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / 28 / 2011 Transaction ID: 25F1DB85C71476A9703 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-4102 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M D D 2 0 1 1 Transaction ID: D999CEAFCB8EAE885 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-4102 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: FCAAA3B08A49F6A062 Amount of Each Receipt this Period 41.67
SUBTOTAL of Receipts This Page (optional)	•	125.01

	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
A O	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may e name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Amy Stoeffler Mailing Address 532 Deerpath Rd City	State	Zip Code	Date of Receipt M
	Glen Ellyn FEC ID number of contributing federal political committee.	C	60137-4102	Amount of Each Receipt this Period 41.67
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate		
— З.	Full Name (Last, First, Middle Initial) Lenora Su Mailing Address 1404 Chelsea Ln			Date of Receipt 0 4 1 4 2 0 1 1
	City	State	Zip Code	Transaction ID: 031A0C6BEB28E6C10F
	Naperville	<u>IL</u>	60565-1612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For:	Occupation Physician	n	
	Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 390.00	
_ ;.	Full Name (Last, First, Middle Initial) Lenora Su			Date of Receipt
	Mailing Address 1404 Chelsea Ln	Otata	7: 0.1	04 28 2011
	City Naperville	State IL	Zip Code 60565-1612	Transaction ID: 27662D49866BFB13E3 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional)			119.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lenora Su Mailing Address 1404 Chelsea Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-1612 C Occupation Physician Aggregate Year-to-Date 390.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Lenora Su Mailing Address 1404 Chelsea Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-1612 C Occupation Physician Aggregate Year-to-Date 390.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Lenora Su Mailing Address 1404 Chelsea Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60565-1612 C Occupation Physician Aggregate Year-to-Date 390.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		117.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using	nd Statements may not be sold or used by any person to the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC			
Full Name (Last, First, Middle Initial) Arnaldo Torres			
Mailing Address 229 Wren Ct		03 / 17 / 2011	
City <u>Bloomingdale</u>	State Zip Code IL 60108-1433	Transaction ID: CCA222BDABE6C2E7F2 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	39.00	
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		
Full Name (Last, First, Middle Initial) Arnaldo Torres	-	Date of Receipt	
Mailing Address 229 Wren Ct			
City Bloomingdale	State Zip Code IL 60108-1433	Transaction ID: DC1EB3E9947CA6435A Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	39.00	
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		
Full Name (Last, First, Middle Initial) Arnaldo Torres	L	Date of Receipt	
Mailing Address 229 Wren Ct		0 4 1 4 2 0 1 1	
City Bloomingdale	State Zip Code IL 60108-1433	Transaction ID: DA1E9835CF29AEB3E5 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	39.00	
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		
CURTOTAL of Descints This Dags (antice	al)	117.00	

FOR LINE NUMBER: PAGE 90 / 101

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Arnaldo Torres Mailing Address 229 Wren Ct City Bloomingdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60108-1433 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: AF80B8074C8359129DB Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Arnaldo Torres Mailing Address 229 Wren Ct City Bloomingdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60108-1433 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Arnaldo Torres Mailing Address 229 Wren Ct City Bloomingdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60108-1433 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		117.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	nd Statements may not be sold or used by any per the name and address of any political committee	
Full Name (Last, First, Middle Initial) Arnaldo Torres Mailing Address 229 Wren Ct City Bloomingdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State Zip Code IL 60108-1433 C Occupation	Date of Receipt M M O 6 O 9 O 9 O 1 O 1 O 1 O 1 O 1 O 1 O 1 O 1
Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 468.00	
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 4E0932B4F22F1EB32
<u>Naperville</u>	IL 60540-5418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) Joseph Towers		Date of Receipt
Mailing Address 412 S Columbia St		03 17 2011
City	State Zip Code	Transaction ID: 9D3045B5EF946ADB
<u>Naperville</u>	IL 60540-5418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
SURTOTAL of Receipts This Page (ontions	ıl)	122.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D M 2 0 1 1 Transaction ID: 6678A9E1B43CA3C1704 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M / D D D / Y Y Y Y Y Transaction ID: 644F6551C091D0DE2E6 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	125.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 101 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 1 1 Transaction ID: AE66AFC1D5F7620971 Amount of Each Receipt this Period 41.67
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Joseph Towers Mailing Address 412 S Columbia St City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-5418 C Occupation Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	•	125.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements may not be sold or used by any personal ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-6727 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60540-6727 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IL 60540-6727 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 3546C5C50DF04552E6 Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional)		117.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 101 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
A .	Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville	State IL	Zip Code 60540-6727	Date of Receipt 0 4 28 2011 Transaction ID: 6AC1B89C5E752E60FFE Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia	n	39.00
_	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 468.00	
B.	Feodor Ung Mailing Address 711 Wellner Rd City	State	Zip Code	Date of Receipt 0 5 1 2 2 0 1 1 Transaction ID: D6B0C1A20D9DA477BE
	Naperville FEC ID number of contributing federal political committee. Name of Employer	C Occupation	60540-6727	Amount of Each Receipt this Period 39.00
	Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Physicia		
С.	Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd			Date of Receipt 0 5 2 6 2 0 1 1
	City Naperville FEC ID number of contributing federal political committee.	State IL	Zip Code 60540-6727	Transaction ID: 2D005917A3227A70945 Amount of Each Receipt this Period 39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 468.00	
	SUBTOTAL of Receipts This Page (optional)			117.00
	TOTAL This Period (last page this line numbe	r only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 101 (check only one) X
A 0	ny information copied from such Reports and Sir for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may not name and address	be sold or used by any pers s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4 .	Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Yea	Zip Code 60540-6727 ar-to-Date ▼ 468.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 65C4D00DA60CCF9794 Amount of Each Receipt this Period 39.00
-	Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Yea	Zip Code 60137-5326 ar-to-Date ▼ 468.00	Date of Receipt M M / D D / Y Y Y Y Y O 3 17 2011 Transaction ID: 74EFB9472F76D6ADC9 Amount of Each Receipt this Period 39.00
 C.	Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate Yea	Zip Code 60137-5326 ar-to-Date ▼ 468.00	Date of Receipt M M O 1 Transaction ID: 8AA68B0E96A291C5D4 Amount of Each Receipt this Period 39.00
,	SUBTOTAL of Receipts This Page (optional)			117.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-5326 C Occupation Physician Aggregate Year-to-Date ▼ 468.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 3F93F85F6D3153CEDE Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-5326 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M / 28 / 2011 Transaction ID: EB751C7B027CAC3B99 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-5326 C Occupation Physician Aggregate Year-to-Date 468.00	Date of Receipt M M M / D D / Y Y Y Y Y O 5 1 2 2 0 1 1 Transaction ID: 02F4644DAB426626F1C Amount of Each Receipt this Period 39.00
SUBTOTAL of Receipts This Page (optional))	117.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC		
Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	State Zip Code IL 60137-5326 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: D01F128A2C66C8248 Amount of Each Receipt this Period 39.00
Other (specify) Full Name (Last, First, Middle Initial) Van Vallina Mailing Address 241 Lorraine St City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	IL 60137-5326 C Occupation	Amount of Each Receipt this Period 39.00
Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 468.00	
Full Name (Last, First, Middle Initial) Jaime Villanueva Mailing Address 1610 Midwest Club	Pkwy	Date of Receipt M M D D 7 Y Y Y Y Y Y Y Y Y
City Oak Brook FEC ID number of contributing federal political committee.	State Zip Code IL 60523-2522 C	Transaction ID: 6B686B7414972D96F Amount of Each Receipt this Period 20.00
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 240.00	
SUBTOTAL of Receipts This Page (optional	n	98.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 101 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	d Statements may not be sold or used by any the name and address of any political committ	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jaime Villanueva Mailing Address 1610 Midwest Club City Oak Brook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	Pkwy State Zip Code IL 60523-2522 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Caroline Wolfe Mailing Address 132 E Fremont Ave City Elmhurst FEC ID number of contributing federal political committee.		Date of Receipt M M / D D D / Y Y Y Y Y 0 5 2 6 2 0 1 1 Transaction ID: 580F20A2EE42EBB945 Amount of Each Receipt this Period 20.00
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Caroline Wolfe	Physician Aggregate Year-to-Date ▼ 240.00	Date of Receipt
Mailing Address 132 E Fremont Ave City Elmhurst FEC ID number of contributing federal political committee.	State Zip Code IL 60126-2324 C	M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional		60.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 101 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PAC	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions
Д.	Full Name (Last, First, Middle Initial) Andrew Yu Mailing Address 1601 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4928 C Occupation Physician Aggregate Year-to-Date ▼ 249.96	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- 3.	Full Name (Last, First, Middle Initial) Andrew Yu Mailing Address 1601 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4928 C Occupation Physician Aggregate Year-to-Date ▼ 249.96	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 4B559065BADA055FF33 Amount of Each Receipt this Period 20.83
_ C).	Full Name (Last, First, Middle Initial) Andrew Yu Mailing Address 1601 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60148-4928 C Occupation Physician Aggregate Year-to-Date ▼ 249.96	Date of Receipt M M M D D D Y Y Y Y Y Y Transaction ID: 40ED5E91AF578FAC1F Amount of Each Receipt this Period 20.83
	SUBTOTAL of Receipts This Page (optional)		62.49
	TOTAL This Period (last page this line number of	only)	11744.62