

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

Illinois Political Active Letter Carriers

ADDRESS (number and street)

P.O. Box 561

☐Check if different  
than previously  
reported. (ACC)

Orland Park

IL

60462

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00264689

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Jack Heniff

Signature of Treasurer

Electronically Filed by Mr. Jack Heniff

Date

07

02

2009

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

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

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 31

Write or Type Committee Name  
Illinois Political Active Letter Carriers

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	60075.01
(b) Cash on Hand at Beginning of Reporting Period .....	60075.01	
(c) Total Receipts (from Line 19) .....	30874.23	30874.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	90949.24	90949.24
7. Total Disbursements (from Line 31) .....	27485.51	27485.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	63463.73	63463.73
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 31

Write or Type Committee Name

Illinois Political Active Letter Carriers

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	7072.87	7072.87
(ii) Unitemized .....	23801.36	23801.36
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	30874.23	30874.23
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30874.23	30874.23
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30874.23	30874.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30874.23	30874.23

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	4470.51	4470.51	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	4470.51	4470.51	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	13015.00	13015.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	27485.51	27485.51	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27485.51	27485.51	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 31

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) .....	30874.23	30874.23
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30874.23	30874.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4470.51	4470.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4470.51	4470.51

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

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

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 25118

City

Tampa

State

FL

Zip Code

33622-5118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

867.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10077

Amount of Each Receipt this Period

867.87

Interest Received on Money  
Market Acct.

**B.**

Full Name (Last, First, Middle Initial)

Debra Blake-Moersch

Mailing Address 3493 S Paw paw rd

City

Earlville

State

ID

Zip Code

60518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10218

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Phillip Bostick

Mailing Address 826 W MacQueen

City

Peoria

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.10313

Amount of Each Receipt this Period

150.00

Contribution

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

1267.87

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Phillip Bostick

Mailing Address 826 W MacQueen

City

Peoria

State

IL

Zip Code

61604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10204

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Tim Brucker

Mailing Address 503 Bowles St

City

Normal

State

IL

Zip Code

61761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10158

Amount of Each Receipt this Period

350.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Phyllis Castic

Mailing Address 971 Millikin Dr

City

Fairview Hgts

State

IL

Zip Code

62208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.10268

Amount of Each Receipt this Period

150.00

Contribution

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

525.00

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 8 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Ken Christy

Mailing Address 1110 Laurel Dr

City

Aurora

State

IL

Zip Code

60506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.10309

Amount of Each Receipt this Period

505.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Kathleen Conwell

Mailing Address 189 E. First St

City

Manteno

State

IL

Zip Code

60950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.10189

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Kathleen Conwell

Mailing Address 189 E. First St

City

Manteno

State

IL

Zip Code

60950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10206

Amount of Each Receipt this Period

100.00

Contribution

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

705.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

A.

Full Name (Last, First, Middle Initial)

John Cooksey

Mailing Address 17962 Monroe Rd

City

Johnston City

State

IL

Zip Code

62951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.10049

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Fred Daudell

Mailing Address 9135 W 144th Pl.

City

Orland Park

State

IL

Zip Code

60462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10198

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Bryant Funches

Mailing Address 703 E. 173rd St

City

So. Holland

State

IL

Zip Code

60473

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.10272

Amount of Each Receipt this Period

150.00

Contribution

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Bernadette Green

Mailing Address 6 Trailwood Ct

City

Belleville

State

IL

Zip Code

62226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.10296

Amount of Each Receipt this Period

260.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Scott Haney

Mailing Address 207 Buena Vista

City

Bartonville

State

IL

Zip Code

62644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10208

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Cliff Howard

Mailing Address 4238 Applewood Ln.

City

Matteson

State

IL

Zip Code

60443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10212

Amount of Each Receipt this Period

150.00

Contribution

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

660.00

**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 11 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

William Jackson

Mailing Address 1103 Coral Ave

City

Lockport

State

ID

Zip Code

60441

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10152

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mack Julion, Sr.

Mailing Address 7826 S Homan

City

Chicago

State

IL

Zip Code

60652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.10377

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Isabella Levi

Mailing Address 4824 W Wabansia

City

Chicago

State

IL

Zip Code

60639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10140

Amount of Each Receipt this Period

50.00

Contribution

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

325.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Reenai Mason

Mailing Address 221 Pine Dale

City

Swansea

State

ID

Zip Code

62221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.10297

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Montago McCraney

Mailing Address 130 S 18th Ave

City

Maywood

State

ID

Zip Code

60153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.10009

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Joe Mercurio

Mailing Address 28679 Smith Rd

City

Medora

State

IL

Zip Code

62063

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10223

Amount of Each Receipt this Period

250.00

Contribution

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Debbie Moench

Mailing Address 3493 S Paw Paw Rd

City

Earlville

State

IL

Zip Code

60518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.10271

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Nessler

Mailing Address 2909 53rd Ave.,W

City

Milan

State

IL

Zip Code

61264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.10005

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Nessler

Mailing Address 2909 53rd Ave.,W

City

Milan

State

IL

Zip Code

61264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10323

Amount of Each Receipt this Period

35.00

Contribution

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

535.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

A.

Full Name (Last, First, Middle Initial)

Richard Nessler

Mailing Address 2909 53rd Ave., W

City

Milan

State

IL

Zip Code

61264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10211

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Kelly Pruka

Mailing Address 4113 N Port Dr

City

Rockford

State

IL

Zip Code

61107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10163

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Peter Skrzypczynski

Mailing Address 4001 S Albany

City

Chicago

State

IL

Zip Code

60632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10240

Amount of Each Receipt this Period

225.00

Contribution

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

725.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Dan Smith

Mailing Address 1558 Fescue Dr

City

Aurora

State

IL

Zip Code

60504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.10300

Amount of Each Receipt this Period

95.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Sophie Szkola

Mailing Address 23022 Oakland Ln

City

Steger

State

IL

Zip Code

60475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.9971

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

George Turner, Jr.

Mailing Address 1657 N. Long Ln.

City

Chicago

State

IL

Zip Code

60639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10236

Amount of Each Receipt this Period

100.00

Contribution

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

445.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

George Turner, Jr.

Mailing Address 1657 N. Long Ln.

City

Chicago

State

IL

Zip Code

60639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10134

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jim Wasserman

Mailing Address 2111 44th St

City

Highland

State

IL

Zip Code

46322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.10017

Amount of Each Receipt this Period

230.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jim Wasserman

Mailing Address 2111 44th St

City

Highland

State

IL

Zip Code

46322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.10372

Amount of Each Receipt this Period

20.00

Contribution

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

275.00

**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 17 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Timothy Willis

Mailing Address 8637 S Wabash

City

Chicago

State

IL

Zip Code

60619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.10276

Amount of Each Receipt this Period

260.00

Contribution

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

260.00

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

7072.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 / 31

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address Bill Payment Center

City  
SaginawState  
WIZip Code  
48663Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10040

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

Amount of Each Disbursement this Period

51.01

**B.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address Bill Payment Center

City  
SaginawState  
WIZip Code  
48663Purpose of Disbursement  
Telephone Fax

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10071

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Amount of Each Disbursement this Period

20.06

**C.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address Bill Payment Center

City  
SaginawState  
WIZip Code  
48663Purpose of Disbursement  
Computer Access

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10072

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Amount of Each Disbursement this Period

51.80

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

122.87

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 31

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

A.

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10070

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

51.01

B.

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10107

Date of Disbursement

05 / 14 / 2009

Amount of Each Disbursement this Period

51.23

C.

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Telephone Fax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10103

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

1999.00

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

2101.24

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 31

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address Bill Payment Center

City  
Saginaw

State  
WI

Zip Code  
48663

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.10102

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

51.61

**B.**

Full Name (Last, First, Middle Initial)

Comcast Cable Co.

Mailing Address POB 3001

City  
Southeastern

State  
PA

Zip Code  
19398-3001

Purpose of Disbursement  
Computer Access

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.9989

Date of Disbursement

02 / 21 / 2009

Amount of Each Disbursement this Period

147.06

**C.**

Full Name (Last, First, Middle Initial)

Comcast Cable Co.

Mailing Address POB 3001

City  
Southeastern

State  
PA

Zip Code  
19398-3001

Purpose of Disbursement  
Computer Maintenance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.9988

Date of Disbursement

02 / 27 / 2009

Amount of Each Disbursement this Period

63.96

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

262.63

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 / 31

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

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

NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

Comcast Cable Co.

Mailing Address POB 3001

City  
SoutheasternState  
PAZip Code  
19398-3001Purpose of Disbursement  
Computer Access

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10039

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	0	9

Amount of Each Disbursement this Period

81.53

**B.**

Full Name (Last, First, Middle Initial)

Comcast Cable Co.

Mailing Address POB 3001

City  
SoutheasternState  
PAZip Code  
19398-3001Purpose of Disbursement  
Compyter Maintenace

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10041

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	9

Amount of Each Disbursement this Period

27.99

**C.**

Full Name (Last, First, Middle Initial)

Comcast Cable Co.

Mailing Address POB 3001

City  
SoutheasternState  
PAZip Code  
19398-3001Purpose of Disbursement  
Computer Access

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.10108

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Amount of Each Disbursement this Period

74.53

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

184.05

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 31

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

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

NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

<b>A.</b> Full Name (Last, First, Middle Initial) Comcast Cable Co.	<b>Transaction ID:</b> SB21B.10104 <b>Date of Disbursement</b>																				
Mailing Address POB 3001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	5		2	0	9													
City Southeastern State PA Zip Code 19398-3001 Purpose of Disbursement Computer Access Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>74.53</td> </tr> </table>	74.53																			
74.53																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service	<b>Transaction ID:</b> SB21B.10075 <b>Date of Disbursement</b>																				
Mailing Address N/A	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	9													
City Ogden State UT Zip Code 84201 Purpose of Disbursement Taxes on Money Market Acct. Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>303.75</td> </tr> </table>	303.75																			
303.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Tigereye Promotions	<b>Transaction ID:</b> SB21B.10105 <b>Date of Disbursement</b>																				
Mailing Address 1000 Progress St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	5		2	0	9													
City Greenville State OH Zip Code 45331 Purpose of Disbursement Promotional Items Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>725.95</td> </tr> </table>	725.95																			
725.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/ Type																				

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

1104.23

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

3775.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

BEAN, MELISSA LUBURICH

Mailing Address PO Box 3068

City  
BarringtonState  
ILZip Code  
60010Purpose of Disbursement  
ContributionCandidate Name  
BEAN, MELISSA LUBURICHCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: SB23.10033

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	9

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

JERRY F COSTELLO

Mailing Address 2608 PRO TOUR DRIVE

City  
BELLEVILLEState  
ILZip Code  
62220Purpose of Disbursement  
ContributionCandidate Name  
JERRY F COSTELLOCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 12

Transaction ID: SB23.10117

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Mailing Address 5956 W. Race Avenue

City  
ChicagoState  
ILZip Code  
60644Purpose of Disbursement  
ContributionCandidate Name  
DAVIS FOR CONGRESS/FRIENDS OF DAVISCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 07

Transaction ID: SB23.10230

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	9

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

FOSTER, G. WILLIAM (BIL)

Mailing Address POB 703

City  
GenevaState  
ILZip Code  
60134

Purpose of Disbursement

Ticket Purchase

Candidate Name

FOSTER, G. WILLIAM (BIL)

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: SB23.10115

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

HALVORSON FOR CONGRESS

Mailing Address PO BOX 176

City  
CRETEState  
ILZip Code  
60417

Purpose of Disbursement

Ticket Purchase

Candidate Name

HALVORSON FOR CONGRESS

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 11

Transaction ID: SB23.10232

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	9

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

JANICE D SCHAKOWSKY

Mailing Address 1101 RIDGE AVENUE

City  
EVANSTONState  
ILZip Code  
60202

Purpose of Disbursement

Ticket Purchase

Candidate Name

JANICE D SCHAKOWSKY

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.10116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

A.

Full Name (Last, First, Middle Initial)

SHIMKUS, JOHN M

Mailing Address 504 Sumner Boulevard

City  
Collinsville

State  
IL

Zip Code  
62234

Purpose of Disbursement  
Contribution

Candidate Name  
VOLUNTEERS FOR SHIMKUS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 19

Transaction ID: SB23.10080

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

**A.**

Full Name (Last, First, Middle Initial)

John Anderson

Mailing Address 7443 W. Pennington Ln.

City Monee State IL Zip Code 60449

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
John Anderson

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.10233

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Bradley John Friends of

Mailing Address PO Drawer 488

City Marion State IL Zip Code 62959

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
Bradley John Friends of

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.10111

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Chapa LaVia Lina Friends of

Mailing Address 63 S. Broadway

City Aurora State IL Zip Code 60505

Purpose of Disbursement  
Contribution

Candidate Name  
Chapa LaVia Lina Friends of

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District:

**Transaction ID:** SB29.10094

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

<b>A.</b> Full Name (Last, First, Middle Initial) Crotty Maggie Friends of Mailing Address POB 203	<b>Transaction ID:</b> SB29.10109 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 9</div> </div>
City State Zip Code Oak Forest IL 60452 Purpose of Disbursement Ticket Purchase Candidate Name Crotty Maggie Friends of Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	<b>Amount of Each Disbursement this Period</b> <div>600.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Dave Koehler Friends of Mailing Address 1413 N.E. Madison Ave. City State Zip Code Peoria IL 61603 Purpose of Disbursement Purchase Tickets Candidate Name Friends of Dave Koehler Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB29.10122 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) DuPage Democratic Committe Mailing Address P.O. Box 185 City State Zip Code Lombard IL 60148 Purpose of Disbursement Ticket Purchase Candidate Name DuPage Democratic Committe Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB29.9963 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>280.00</div>

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

**2880.00**

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

<b>A.</b> Full Name (Last, First, Middle Initial) Flider Bob Friends of	<b>Transaction ID:</b> SB29.10092 <b>Date of Disbursement</b>
Mailing Address POB 232	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 9</div> </div>
City State Zip Code Mt. Zion IL 62549	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ticket Purchase	<div>600.00</div>
Candidate Name Flider Bob Friends of	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) FrankfortTownship Democratic Org.	<b>Transaction ID:</b> SB29.10034 <b>Date of Disbursement</b>
Mailing Address 342 N. LaGrange Rd PMB 229	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 2 / 2 0 0 9</div> </div>
City State Zip Code Frankfort IL 60423	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ticket Purchase	<div>240.00</div>
Candidate Name Frankfort Township Demo Org.	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Friends of A.J. Wilhelmi	<b>Transaction ID:</b> SB29.10110 <b>Date of Disbursement</b>
Mailing Address POB 2458	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 9</div> </div>
City State Zip Code Joliet IL 60435	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ticket Purchase	<div>350.00</div>
Candidate Name Friends of A.J. Wilhelmi	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	

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

1190.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

<b>A.</b> Full Name (Last, First, Middle Initial) Giannioulas Citizens for	<b>Transaction ID:</b> SB29.10096 <b>Date of Disbursement</b>
Mailing Address POB 8588	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 9</div> </div>
City Chicago State IL Zip Code 60680	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>1500.00</div>
Candidate Name Giannioulas Citizens for	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) HYNES, DANIEL W Friends of	<b>Transaction ID:</b> SB29.10095 <b>Date of Disbursement</b>
Mailing Address 1534 N Wells St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 9</div> </div>
City Chicago State IL Zip Code 60610	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>2000.00</div>
Candidate Name HYNES, DANIEL W Friends of	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kane County Democrats	<b>Transaction ID:</b> SB29.9953 <b>Date of Disbursement</b>
Mailing Address POB 365	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 1 / 2 0 0 9</div> </div>
City North Aurora State IL Zip Code 60542	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ticket Purchase	<div>750.00</div>
Candidate Name Kane County Democrats	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4250.00

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

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

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

FOR LINE NUMBER:  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

A.

Full Name (Last, First, Middle Initial)

Kendall County Dem. Women

Mailing Address 5100 Baseline Rd.

City  
Oswego

State  
IL

Zip Code  
60543

Purpose of Disbursement  
Contribution

Candidate Name  
Kendall County Dem. Women

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.9994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Link Terry Friends of

Mailing Address 248 Ambragio Dr

City  
Gurnee

State  
IL

Zip Code  
60031

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
Link Terry Friends of

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District:

Transaction ID: SB29.10091

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

McGuire for Treasurer

Mailing Address 1210 Glenwood Ave.

City  
Joliet

State  
IL

Zip Code  
60435

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
McGuire for Treasurer

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.9991

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120.00

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

1520.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

<b>A.</b> Full Name (Last, First, Middle Initial) Joan Murphy	<b>Transaction ID:</b> SB29.10093 <b>Date of Disbursement</b>																				
Mailing Address POB 544	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	0	9												
City Midlothian State ID Zip Code 60445	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ticket Purchase	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Joan Murphy	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Noland Dave Citizens for	<b>Transaction ID:</b> SB29.10085 <b>Date of Disbursement</b>																				
Mailing Address POB 1025	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	0	9												
City Elgin State IL Zip Code 60121	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Purchase Ticket	<table border="1"> <tr> <td>325.00</td> </tr> </table>	325.00																			
325.00																					
Candidate Name Noland Dave Citizens for	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Will County Democrats	<b>Transaction ID:</b> SB29.10090 <b>Date of Disbursement</b>																				
Mailing Address POB 4242	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	4		2	0	0	9												
City Joliet State IL Zip Code 60434	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ticket Purchase	<table border="1"> <tr> <td>600.00</td> </tr> </table>	600.00																			
600.00																					
Candidate Name Will County Democrats	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

1425.00

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

13015.00