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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 Federal Independent Campaign Committee 1325 S Wabash ADDRESS (number and street) Suite 105 Check if different than previously Chicago 60605 ΙĻ reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00262923 Χ 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 Х Quarterly Report(Q1) (c) 12-Day 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 (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 17 2008 03 3 1 2008 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. David Igasaki Type or Print Name of Treasurer Electronically Filed by David Igasaki 04 15 2008 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 FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Federal Independent Campaign Committee D " D 0 1 17 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1177.95 January 1 (b) Cash on Hand at 1252.95 Begining of Reporting Period ..... 30057.19 30132.19 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 31310.14 31310.14 6(a) and 6(c) for Column B) ..... 30623.69 30623.69 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 686.45 686.45 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463

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

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name Federal Independent Campaign Committee

	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)	1000.00	1000.00
	(ii) Unitemized	300.00	375.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	1300.00	1375.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	1000.00	1000.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2300.00	2375.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	27757.19	27757.19
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	27757.19	27757.19
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30057.19	30132.19
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	2300.00	2375.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
1.	Operating Expenditures:  (a) Shared Federal/Non-Federal			
	Activity (from Schedule H4)	500.00	500.00	
	(i) Federal Share	300.00	300.00	
	(ii) Non-Federal Share	27739.51	27739.51	
	(b) Other Federal Operating	1.81	1.81	
	Expenditures	1.01	1.01	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	28241.32	28241.32	
	Transfers to Affiliated/Other Party			
	Committees	0.00	0.00	
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00	
-	Independent Expenditure	2382.37	2382.37	
	(use Schedule E)	2302.37	2302.37	
•	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	
	(222 227.000.0 7,			
	Loan Repayments Made	0.00	0.00	
,	Loans Made	0.00	0.00	
	Refunds of Contributions To:	0.00	0.00	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
		0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees	0.00	0.00	
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00	
	(add Lines 28(a), (b), and (c))	0.00	0.00	
).	Other Disbursements	0.00	0.00	
).	Federal Election Activity (2 U.S.C 431(20))			
	(a) Shared Federal Election Activity			
	(from Schedule H6)	0.00	0.00	
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely	0.00	0.00	
	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	
	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	30623.69	30623.69	
2.	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	(Subtract Line 21(a)(ii) and Line 30(a)(ii)			

#### **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)	2300.00	2375.00	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	2300.00	2375.00	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	501.81	501.81	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	501.81	501.81	

FE6AN026

A.

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

Other (specify)

FOR LINE NUMBER: PAGE 6/36 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 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) Federal Independent Campaign Committee Full Name (Last, First, Middle Initial) Rich Whitehead Date of Receipt Mailing Address 26 Bigelow 02 01 2008 City Zip Code State Transaction ID: SA11AI.4995 Park Forest IL 60466 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Self Occupation **Database Administrator** Receipt For: Aggregate Year-to-Date Primary General 1000.00

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	1000.00

A.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 36 (check only one)  11a 11b X 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) Federal Independent Campaign Co	ommittee	
Full Name (Last, First, Middle Initial) DAVIS FOR CONGRESS/FRIENDS OF DAY Mailing Address 5956 W. Race Ave City		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Chicago FEC ID number of contributing federal political committee.	IL 60644  C C00172619	Amount of Each Receipt this Period 1000.00
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼  1000.00	

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1000.00
TOTAL This Period (last page this line number only)	<b>•</b>	1000.00

ITEMIZED INDEPENDENT EX	PENDITURES			PAGE 8/36	
NAME OF COLUMNITY ( F II)				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full) Federal Independent Campaign Committee				EC IDENTIFICATION NUMBER	
Check if 24-hour notice 48	-hour notice			C00262923	
Full Name (Last, First, Middle, Initial) of Pa			Date		
Chicago Sun-Times	iyoo			24 2008	
Mailing Address			Amount		
350 N Orleans				833.00	
City	State Zip	Code	Transaction I	D: SE.5078	
Chicago	IL 606		Office Sought:	House State:	
Purpose of Expenditure	Catagony			Senate District:	
Newspaper Ad	Category/ Type	004		Presidential	
Name of Federal Candidate supported or 0	Opposed by expenditure:		Check One:	X Support Oppose	
			Disbursement F	or: X Primary General	
Calendar Year-To-Date Per Election	400	20.00		(specify) :	
for Office Sought	183	36.99	2008		
Full Name (Last, First, Middle, Initial) of Pa	ıyee		Date		
Chicago Sun-Times			0,1	2008	
Mailing Address			Amount		
350 N Orleans				307.82	
City	State Zip	Code	Transaction I	<b>D:</b> SE.5079	
Chicago	IL 606		Office Sought:	House State:	
Purpose of Expenditure	Catagony			Senate District:	
Newspaper Ad	Category/ Type	004		Presidential	
Name of Federal Candidate supported or 0	Opposed by expenditure:		Check One:	X Support Oppose	
			Disbursement F	or: X Primary General	
Colonday Voor To Data Day Floation				(specify) :	
Calendar Year-To-Date Per Election for Office Sought	214	14.81	2008		
(a) SUBTOTAL of Itemized Independent Exp	enditures			1140.82	
(b) SUBTOTAL of Unitemized Independent E					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independence or at the request or suggestion of, any candidate committee) any political party committee or its age	or authorized committee or agent				
David Igasaki Signature		Date 0 4		008	

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 9/36 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)		FE	C IDENTIFICATION NUMBER 🔻		
Federal Independent Campaign Committee		c	C00262923		
Check if 24-hour notice 48-hour notice					
Full Name (Last, First, Middle, Initial) of Payee		Date			
Des Plaines Publishing		0 2 D	27 / Y Y Y Y Y Y Y		
Mailing Address 1000 Executive Way		Amount			
1000 Executive way			237.56		
City State	Zip Code	Transaction ID	): SE.5080		
Des Plaines IL	60018	Office Sought:	House State:		
Purpose of Expenditure	egory/ ooe	-	Senate District:		
Drinting	rype 006	L	Presidential		
Name of Federal Candidate supported or Opposed by expenditure:		Check One:	X Support Oppose		
		Disbursement Fo	or: X Primary General		
Calendar Year-To-Date Per Election	0000 07		specify):		
for Office Sought	2382.37	2008			
Full Name (Last, First, Middle, Initial) of Payee	<u> </u>	Date			
Mailing Concept Solutions		M M / D	2 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address		Amount			
7224 W 60th St			159.37		
-		Transaction ID	): SE.5091		
City State Summit IL	Zip Code 60501	Office Sought:	House State:		
Purpose of Expenditure			Senate District:		
Mailing	egory/ Type 006	L	Presidential		
Name of Federal Candidate supported or Opposed by expenditure:		Check One:	X Support Oppose		
		Disbursement Fo	or: X Primary General		
			specify):		
Calendar Year-To-Date Per Election	159.37	2008	specify)		
for Office Sought					
(a) SUBTOTAL of Itemized Independent Expenditures			396.93		
( <b>-</b> ) <b>- - - - - - - - - -</b>					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	_ M * M		VVV		
David Igasaki	Date 04	15 20	Y Y Y Y 0 8		
Signature					

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 10 / 36 FOR LINE 24 OF FORM 3X					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER					
Federal Independent Campaign Committee	C C00262923					
Check if 24-hour notice 48-hour notice	0					
Full Name (Last, First, Middle, Initial) of Payee	Date					
Postmaster	$ \begin{bmatrix} M & M \\ O & 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $					
Mailing Address	Amount					
	844.62					
City State Zip Code	Transaction ID: SE.5125					
Chicago IL	Office Sought: House State:					
Purpose of Expenditure  Category/ Type  006	Senate District: Presidential					
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose					
	Disbursement For: X Primary General					
Calendar Year-To-Date Per Election 1003.99	Other (specify) :					
for Office Sought						
Full Name (Last, First, Middle, Initial) of Payee	Date					
Chicago Sun-Times	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
Mailing Address	Amount					
350 N Orleans	119.00					
07.	Transaction ID: SE.5054					
City State Zip Code Chicago IL 60654	Office Sought: X House State: IL					
Purpose of Expenditure	Senate District: 08					
Category/ Type	Presidential					
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose					
KENNETH MR. ARNOLD	Pith was a few Y Pith a Count					
	Disbursement For: X Primary General					
Calendar Year-To-Date Per Election 0.00	Other (specify) :					
for Office Sought	[MEMO ITEM]					
(a) SUBTOTAL of Itemized Independent Expenditures	844.62					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
David Igasaki Signature  Date  Date	15 2008 Y Y Y Y					

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 11 / 36 FOR LINE 24 OF FORM 3X					
NAME OF COMMITTEE (In Full)						
Federal Independent Campaign Committee	FEC IDENTIFICATION NUMBER ▼  C C00262923					
Check if 24-hour notice 48-hour notice	0					
	Date					
Chicago Sun-Times	$\begin{bmatrix} M & M & M \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$					
Mailing Address	Amount					
350 N Orleans	119.00					
City State Zip Code	Transaction ID: SE.5058					
Chicago IL 60654	Office Sought: X House State: IL					
Purpose of Expenditure  Category/ Type  004	Senate District: 14 Presidential					
Name of Federal Candidate supported of Opposed by expenditure.	Check One: X Support Oppose					
JONATHAN JOHN LAESCH	Disbursement For: X Primary General					
	Other (specify) :					
Calendar Year-To-Date Per Election 0.00	2008					
for Office Sought	[MEMO ITEM]					
Full Name (Last, First, Middle, Initial) of Payee	Date					
Chicago Sun-Times	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
Mailing Address	Amount					
350 N Orleans	119.00					
City State Zip Code	Transaction ID: SE.5059					
City State Zip Code Chicago IL 60654	Office Sought: House State:					
Purpose of Expenditure	Senate District: 00					
Category/ Type	X Presidential					
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose					
CYNTHIA MCKINNEY	Disbursement For: X Primary General					
Calendar Year-To-Date Per Election 0.00	Other (specify) : 2008					
for Office Sought	[MEMO ITEM]					
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coor at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the rep committee) any political party committee or its agent.						
David Igasaki Date 04	D D Y Y Y Y Y 15 2008					
Signature						

ITEMIZED INDEPENDENT EX	PENDITURES		PAGE 12 / 36 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)						
Federal Independent Campaign Committee			FEC IDENTIFICATION NUMBER ▼  C C00262923			
Check if 24-hour notice 48	-hour notice					
Full Name (Last, First, Middle, Initial) of Pa	iyee		Date			
Chicago Sun-Times	•		$ \begin{bmatrix} M & M \\ 0, 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2, 4 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2, 0 & 0, 8 \end{bmatrix} $			
Mailing Address			Amount			
350 N Orleans			119.00			
City	State Zip Cod	e	Transaction ID: SE.5060			
Chicago	IL 60654		Office Sought: X House State: IL			
Purpose of Expenditure	Category/ Type	004	Senate District: 09 Presidential			
Name of Federal Candidate supported or 0	Opposed by expenditure:		Check One: X Support Oppose			
JANICE D SCHAKOWSKY			Disbursement For: X Primary General			
			Other (specify):			
Calendar Year-To-Date Per Election	0.0	00	2008			
for Office Sought			[MEMO ITEM]			
Full Name (Last, First, Middle, Initial) of Pa	ıyee		Date			
Chicago Sun-Times			$\begin{bmatrix} M & M \\ O & 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 4 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$			
Mailing Address			Amount			
350 N Orleans			119.00			
City	State Zip Cod	e	Transaction ID: SE.5061			
Chicago	IL 60654		Office Sought: X House State: IL			
Purpose of Expenditure	Category/		Senate District: 08			
	Type	004	Presidential			
Name of Federal Candidate supported or 0	Dpposed by expenditure:		Check One: X Support Oppose			
RANDI SCHEURER			Disbursement For: X Primary General			
			Other (specify):			
Calendar Year-To-Date Per Election	0.	00	2008			
for Office Sought			[MEMO ITEM]			
(a) SUBTOTAL of Itemized Independent Exp	enditures		0.00			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independ or at the request or suggestion of, any candidate of committee) any political party committee or its ago	or authorized committee or agent of ei					
David Igasaki Signature	Dat	e 04	D D Y Y Y Y Y 2008			
<b>3</b>						

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 13 / 36					
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X					
Federal Independent Campaign Committee	FEC IDENTIFICATION NUMBER ▼ C C00262923					
Check if 24-hour notice 48-hour notice	C C00262923					
Full Name (Last, First, Middle, Initial) of Payee	Date					
Chicago Sun-Times	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address	Amount					
350 N Orleans	119.00					
City State Zip Code	Transaction ID: SE.5062					
Chicago IL 60654	Office Sought: X House State: IL					
Purpose of Expenditure  Category/ Type  O04	Senate District: 10 Presidential					
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose					
DANIEL J SEALS	Disbursement For: X Primary General					
Calendar Year-To-Date Per Election	Other (specify) :					
for Office Sought	2008 [MEMO ITEM]					
Full Name (Last, First, Middle, Initial) of Payee	Date					
Chicago Sun-Times	$\begin{bmatrix} M & M & M \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$					
Mailing Address 350 N Orleans	Amount					
000 IV Citcuits	119.00					
City State Zip Code	Transaction ID: SE.5063					
Chicago IL 60654	Office Sought: X House State: IL Senate District: 07					
Purpose of Expenditure  Category/ Type  004	Presidential					
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose					
DAVIS FOR CONGRESS	Disbursement For: X Primary General					
	Other (specify) :					
Calendar Year-To-Date Per Election 0.00 for Office Sought	2008 [MEMO ITEM]					
(a) SUBTOTAL of Itemized Independent Expenditures	0.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the committee) any political party committee or its agent.						
David Igasaki Signature  Date 0 4	15 2008 Y Y Y					

TEMIZED INDEPENDENT EXP	ENDITURES			PAGE 14/36
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X
Federal Independent Campaign Committee				FEC IDENTIFICATION NUMBER ▼ C C00262923
Check if 24-hour notice 48-hour	ur notice			C C00262923
Full Name (Last, First, Middle, Initial) of Payer			Date	
Chicago Sun-Times	•		M M /	24 7 2008
Mailing Address			Amount	
350 N Orleans				289.76
City	State	Zip Code		1 ID: SE.5065
Chicago	IL	60654	Office Sought	
Purpose of Expenditure	Ca	tegory/ Type 004		Senate District: 07 Presidential
Name of Federal Candidate supported or Opp	osed by expenditure:	:	Check One:	X Support Oppose
DAVIS FOR CONGRESS			Dishursement	For: X Primary General
				er (specify) :
Calendar Year-To-Date Per Election		0.00	2008	* * * * * * * * * * * * * * * * * * * *
for Office Sought				[MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payed	)		Date	
Chicago Sun-Times			M M /	24 2008
Mailing Address			Amount	
350 N Orleans				18.06
City	State	Zip Code	Transaction	1 ID: SE.5068
Chicago	IL	60654	Office Sought	
Purpose of Expenditure	Ca	tegory/ 004		Senate District: _09 Presidential
		Туре	Check One:	χ Support Oppose
Name of Federal Candidate supported or Opp JANICE D SCHAKOWSKY	osed by expenditure:		Official Official	X Support Oppose
or who is a soon who work!			Disbursement	For: X Primary General
Calendar Year-To-Date Per Election		0.00	Othe 2008	er (specify) :
for Office Sought		0.00	2006	[MEMO ITEM]
(a) SUBTOTAL of Itemized Independent Expendent	litures			0.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent or at the request or suggestion of, any candidate or a committee) any political party committee or its agent.				
Devid Instali		Date 0.4		Y " Y " Y " Y " Y
David Igasaki Signature		Date 0.4	15	2008

TEMIZED INDEPENDENT EXPENDITURES	PAGE 15/36
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X
Federal Independent Campaign Committee	FEC IDENTIFICATION NUMBER ▼ C C00262923
Check if 24-hour notice 48-hour notice	C 000202323
Full Name (Last, First, Middle, Initial) of Payee	Date
Des Plaines Publishing	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	Amount
1000 Executive Way	25.95
City State Zip Code	Transaction ID: SE.5081
Des Plaines IL 60018	Office Sought: House State:
Purpose of Expenditure Printing  Category/ Type  006	Senate District: 00  X Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
CYNTHIA MCKINNEY	Disbursement For: X Primary General
	Other (specify):
Calendar Year-To-Date Per Election 0.00	2008
for Office Sought	[MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payee	Date
Des Plaines Publishing	$\begin{bmatrix} M & M & M \\ O & Z \end{bmatrix} / \begin{bmatrix} D & D \\ Z & T \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix}$
Mailing Address	Amount
1000 Executive Way	25.95  Transaction ID: SE.5082
City State Zip Code	
Des Frances	Office Sought: X House State: IL Senate District: 08
Purpose of Expenditure Printing  Category/ 006	Presidential
Type	
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
KENNETH MR. ARNOLD	Disbursement For: X Primary General
01 1 V T D D 51 ii	Other (specify) :
Calendar Year-To-Date Per Election 0.00 for Office Sought	[MEMO ITEM]
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) Color of the content of the content of the color of t	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in corn at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
	D D Y Y Y Y
David Igasaki Signature  Date 0 4	15 2008
Orginator O	

TEMIZED INDEPENDENT EXPENDITUR	RES		PAGE 16 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC II	DENTIFICATION NUMBER 🔻
Federal Independent Campaign Committee		С	C00262923
Check if 24-hour notice 48-hour notice			00000000
Full Name (Last, First, Middle, Initial) of Payee		Date	
Des Plaines Publishing		0 2 2	2008
Mailing Address		Amount	
1000 Executive Way			81.86
City State	e Zip Code	Transaction ID:	
Des Plaines IL	60018	Office Sought: X	House State: IL
Purpose of Expenditure	Category/ OOG	$\vdash$	Senate District: 07  Presidential
Printing	Type 006		Fresiderilla
Name of Federal Candidate supported or Opposed by exper DAVIS FOR CONGRESS	nditure:	Check One:	Support Oppose
DAVIST ON CONGRESS		Disbursement For:	X Primary General
Calendar Year-To-Date Per Election			cify) :
for Office Sought	0.00	2008 [ME	EMO ITEM]
		Data	
Full Name (Last, First, Middle, Initial) of Payee		Date	) / Y Y Y Y
Des Plaines Publishing		0 2 2	7 2008
Mailing Address		Amount	
1000 Executive Way			25.95
O't.	e Zip Code	Transaction ID:	SE.5087
City State Des Plaines IL	60018	Office Sought: X	House State: IL
Purpose of Expenditure			Senate District: 14
Printing	Category/ Type 006	Ш	Presidential
Name of Federal Candidate supported or Opposed by exper	nditure:	Check One:	Support Oppose
JONATHAN JOHN LAESCH		B: 1	
		Disbursement For:	
Calendar Year-To-Date Per Election	0.00	2008	cify) :
for Office Sought	0.00	[ME	EMO ITEM]
(a) CURTOTAL of Barrieral ladar and set Funcacitives			0.00
(a) SUBTOTAL of Itemized Independent Expenditures			0.00
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures r or at the request or suggestion of, any candidate or authorized common committee) any political party committee or its agent.			
David Igasaki	Date 04	15 2008	
Signature			

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 17/36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Federal Independent Campaign Committee	C C00262923
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
Des Plaines Publishing	0 2 / D 2 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	Amount
1000 Executive Way	25.95
City State Zip Code	Transaction ID: SE.5088
Des Plaines IL 60018	Office Sought: X House State: IL
Purpose of Expenditure Category/	Senate District: 09
Printing Category Type 006	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
JANICE D SCHAKOWSKY	Disbursement For: X Primary General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	2008 [MEMO ITEM]
F. II Nove (Leat First Middle 1979) of Decem	But
Full Name (Last, First, Middle, Initial) of Payee	Date M M / D D / Y Y Y Y
Des Plaines Publishing	0 2 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	Amount
1000 Executive Way	25.95
City State Zip Code	Transaction ID: SE.5089
Des Plaines IL 60018	Office Sought: X House State: IL
Purpose of Expenditure  Category/  Category/	Senate District: 08
Printing Category Type 006	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
RANDI SCHEURER	Disbursement For: X Primary General
	Other (specify):
Calendar Year-To-Date Per Election 0.00	2008 [MEMO ITEM]
for Office Sought	[wews rem]
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SOBTOTAL OF NOTINEED INDEPENDENT EXPENDITURES	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the committee) any political party committee or its agent.	
David Igasaki Date 0 4	15 Y Y Y Y Y 15 15 15 15 15 15 15 15 15 15 15 15 15
Signature	

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 18/36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Federal Independent Campaign Committee	C C00262923
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
Des Plaines Publishing	02 / 27 / 2008
Mailing Address 1000 Executive Way	Amount
1000 Executive way	25.95
City State Zip Code	Transaction ID: SE.5090
Des Plaines IL 60018	Office Sought: X House State: IL
Purpose of Expenditure Category/	Senate District: 10
Printing Category/ Type 006	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
DANIEL J SEALS	Disbursement For: X Primary General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	2008 [MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payee	Date
Mailing Concept Solutions	$\begin{bmatrix} M & M & I & D & D & D & I & Y & Y & Y & Y \\ 0 & 1 & 2 & 2 & I & 2 & 0 & 0 & 8 \end{bmatrix}$
Mailing Address	Amount
7224 W 60th St	17.41
	Transaction ID: SE.5092
City State Zip Code Summit IL 60501	Office Sought: House State:
Purpose of Expenditure	Senate District: 00
Mailing Category/ Type 006	X Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
CYNTHIA MCKINNEY	
	Disbursement For: X Primary General
Calendar Year-To-Date Per Election 0.00	Other (specify) : 2008
for Office Sought	[MEMO ITEM]
	0.00
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL of Officernized independent Experiationes	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the committee) any political party committee or its agent.	
David Igasaki Date 0.4	15 2008
Signature Signature	
-	

TEMIZED INDEPENDENT EX	PENDITURES		PAGE 19 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER
Federal Independent Campaign Committee			C C00262923
Check if 24-hour notice 48	-hour notice		
Full Name (Last, First, Middle, Initial) of Pa	ayee	Date	
Mailing Concept Solutions		M M O 1	$\begin{bmatrix} D & D & 1 \\ 2 & 2 & 1 \end{bmatrix}$
Mailing Address		Amount	
7224 W 60th St			17.41
City	State Zip Code		on ID: SE.5093
Summit	IL 60501	Office Soug	
Purpose of Expenditure	O ata manud		Senate District: 08
Mailing	Category/ Type	006	Presidential
Name of Federal Candidate supported or C	Opposed by expenditure:	Check One	Support Oppose
-		Disburseme	ent For: X Primary General
Calendar Year-To-Date Per Election			her (specify) :
for Office Sought	0.00	2008	[MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Pa	ayee	Date	
Mailing Concept Solutions		M M O 1	$\begin{bmatrix} D & D & 1 \\ 2 & 2 & 1 \end{bmatrix}$
Mailing Address		Amount	
7224 W 60th St			54.91
City	State Zip Code		on ID: SE.5094
Summit	IL 60501	Office Soug	
Purpose of Expenditure	Category/		Senate District: 07 Presidential
Mailing	Type	006	
Name of Federal Candidate supported or 0	Opposed by expenditure:	Check One	Σ Support Oppose
DAVIS FOR CONGRESS		Disburseme	ent For: X Primary General
		Ot	her (specify) :
Calendar Year-To-Date Per Election for Office Sought	0.00	2008	[MEMO ITEM]
(a) SUBTOTAL of Itemized Independent Exp	enditures		0.00
(b) SUBTOTAL of Unitemized Independent B	Expenditures	L	
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent or at the request or suggestion of, any candidate committee) any political party committee or its again	or authorized committee or agent of either		
		M M D D	Y " Y " Y " Y
David Igasaki Signature	Date	0 4 1 5	2008

ITEMIZED INDEPENDENT EX	PENDITURES		PAGE 20 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			
Federal Independent Campaign Committee			FEC IDENTIFICATION NUMBER ▼  C C00262923
Check if 24-hour notice 48	-hour notice		
Full Name (Last, First, Middle, Initial) of Pa	iyee		Date
Mailing Concept Solutions	•		$ \begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
Mailing Address			Amount
7224 W 60th St			17.41
City	State Zip Coo	de	Transaction ID: SE.5095
Summit	IL 60501		Office Sought: X House State: IL
Purpose of Expenditure	Catagory		Senate District: 14
Mailing	Category/ Type	006	Presidential
Name of Federal Candidate supported or C JONATHAN JOHN LAESCH	Opposed by expenditure:		Check One: X Support Oppose
			Disbursement For: X Primary General
Calendar Year-To-Date Per Election		00	Other (specify) :
for Office Sought	0.	00	[MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Pa	ıyee		Date
Mailing Concept Solutions			$\begin{bmatrix} M & M \\ O & 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
Mailing Address			Amount
7224 W 60th St			17.41
City	State Zip Coo	de	Transaction ID: SE.5096
Summit	IL 60501		Office Sought: X House State: IL Senate District: 09
Purpose of Expenditure	Category/	000	Presidential
Mailing	Туре	006	
Name of Federal Candidate supported or 0	Opposed by expenditure:		Check One: X Support Oppose
JANICE D SCHAKOWSKY			Disbursement For: X Primary General
Calendar Year-To-Date Per Election			Other (specify) :
for Office Sought	0.	00	<sup>2008</sup> [MEMO ITEM]
(a) SUBTOTAL of Itemized Independent Exp	enditures		0.00
(b) SUBTOTAL of Unitemized Independent E	Expenditures		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independence or at the request or suggestion of, any candidate committee) any political party committee or its age	or authorized committee or agent of e		
		ММ	D D Y Y Y Y
David Igasaki Signature	Da	te 04	15 2008
- 9			

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 21 / 36		
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X		
Federal Independent Campaign Committee	FEC IDENTIFICATION NUMBER  C C00262923		
Check if 24-hour notice 48-hour notice	C COCCOCC		
Full Name (Last, First, Middle, Initial) of Payee	Date		
Mailing Concept Solutions	M M / D D / Y Y Y Y Y Y Y Y Z 2 0 0 8		
Mailing Address	Amount		
7224 W 60th St	17.41		
City State Zip Code	Transaction ID: SE.5097		
Summit IL 60501	Office Sought: X House State: IL		
Purpose of Expenditure Mailing  Category/ Type  006	Senate District: 08 Presidential		
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose		
RANDI SCHEURER	Disbursement For: X Primary General		
	Other (specify) :		
Calendar Year-To-Date Per Election 0.00	2008		
for Office Sought	[MEMO ITEM]		
Full Name (Last, First, Middle, Initial) of Payee	Date		
Mailing Concept Solutions	$\begin{bmatrix} M & M \\ O & 1 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$		
Mailing Address	Amount		
7224 W 60th St	17.41		
City State Zip Code	Transaction ID: SE.5098		
Summit IL 60501	Office Sought: X House State: IL Senate District: 10		
Purpose of Expenditure Mailing  Category/ 006	Presidential		
Mailing States 7 Type 006			
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose		
DANIEL J SEALS	Disbursement For: X Primary General		
	Other (specify):		
Calendar Year-To-Date Per Election 0.00	2008		
for Office Sought	[MEMO ITEM]		
(a) SUBTOTAL of Itemized Independent Expenditures	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
David Igasaki Signature  Date 0 4	D D 2 2 0 0 8 Y		

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 22 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
Federal Independent Campaign Committee	C C00262923
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	0 1
Mailing Address	Amount
	92.27
City State Zip Code	Transaction ID: SE.5130
Chicago IL	Office Sought: House State:
Purpose of Expenditure  Category/ Category/	Senate District: 00  X Presidential
Postage Category/ Type 006	A Fresidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
CYNTHIA MCKINNEY	Disbursement For: X Primary General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	<sup>2008</sup> [MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address	Amount
	92.27
City.	Transaction ID: SE.5131
City State Zip Code IL	Office Sought: X House State: IL
Purpose of Expenditure	Senate District: 08  Presidential
Postage Category/ Type 006	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
KENNETH MR. ARNOLD	Disbursement For: X Primary General
	Other (specify):
Calendar Year-To-Date Per Election 0.00	2008 [MEMO ITEM]
for Office Sought	[
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
David Igasaki Date 0 4	15 2008
Signature Signature	

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 23 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
Federal Independent Campaign Committee	C C00262923
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	0 1
Mailing Address	Amount
	291.00
City State Zip Code	Transaction ID: SE.5133
Chicago	Office Sought: X House State: IL
Purpose of Expenditure  Category/ Category/	Senate District: 07 Presidential
Postage Category/ Type 006	Tresidential
Name of Federal Candidate supported or Opposed by expenditure: DAVIS FOR CONGRESS	Check One: X Support Oppose
DAVIS I ON CONGNESS	Disbursement For: X Primary General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	[MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	$\begin{bmatrix} M & M \\ O & 1 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
Mailing Address	Amount
	92.27
City.	Transaction ID: SE.5134
City State Zip Code IL	Office Sought: X House State: IL
Purpose of Expenditure	Senate District: 14  Presidential
Postage Category/ Type 006	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
JONATHAN JOHN LAESCH	Disbursement For: X Primary General
	Other (specify) :
Calendar Year-To-Date Per Election 0.00	2008 [MEMO ITEM]
for Office Sought	[
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
David Igasaki Date 0 4	15 2008
Signature	

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 24 / 36 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
Federal Independent Campaign Committee	C C00262923
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	0 1
Mailing Address	Amount
	92.27
City State Zip Code	Transaction ID: SE.5136
_Chicago IL	Office Sought: X House State: IL
Purpose of Expenditure  Category/ Category/	Senate District: 09 Presidential
Postage Category/ Type 006	Trestoritia
Name of Federal Candidate supported or Opposed by expenditure: JANICE D SCHAKOWSKY	Check One: X Support Oppose
JANICE D SCHAROWSKY	Disbursement For: X Primary General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	<sup>2008</sup> [MEMO ITEM]
Full Name (Last, First, Middle, Initial) of Payee	Date
Postmaster	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address	Amount
	92.27
City Chata Tin Code	Transaction ID: SE.5139
City State Zip Code IL	Office Sought: X House State: IL
Purpose of Expenditure	Senate District: 08  Presidential
Postage Category/ Type 006	Fresidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
RANDI SCHEURER	Disbursement For: X Primary General
	Other (specify) :
Calendar Year-To-Date Per Election 0.00	2008 [MEMO ITEM]
for Office Sought	[
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
David Igasaki Date 0 4	15 2008
Signature	

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TEMIZED INDEPENDENT EX	XPENDITURES	PAGE 25/36
		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Federal Independent Campaign Committee		C C00262923
Check if 24-hour notice 48	3-hour notice	
Full Name (Last, First, Middle, Initial) of P	ayee	Date
Postmaster		$\begin{bmatrix} M & M \\ 0, 1 \end{bmatrix} / \begin{bmatrix} D & D \\ 2, 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2, 0 & 0, 8 \end{bmatrix}$
Mailing Address		Amount
		92.27
City	State Zip Code	Transaction ID: SE.5140
_Chicago	IL	Office Sought: X House State: IL
Purpose of Expenditure Postage	Category/ Type	Senate District: 10 Presidential
Name of Federal Candidate supported or	Opposed by expenditure:	Check One: X Support Oppose
DANIEL J SEALS		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	0.00	Other (specify) :  2008  [MEMO ITEM]
-		L

(a) SUBTOTAL of Itemized Independent Expenditures	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	2382.37		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
David Igasaki Dignature	ate 0 4 1 5 2 0 0 8		

#### **METHOD OF ALLOCATION FOR:**

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER
   DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)			
Federal Independent Campaign Committee			
USE ONLY ONE SECTION, A or B			
A. State and Local Party Committees			
Fixed Percentage (select one)			
Presidential-Only Election Year (28% Federal)			
——— Presidential and Senate Election Year (36% Federal)			
Senate-Only Election Year (21% Federal)			
Non-Presidential and Non-Senate Election Year (15% Federal)			
B. Separate Segregated Funds and Nonconnected Committees			
Flat Minimum Federal Percentage			
If the committee will allocate using the flat minimum percentage of 50% federal funds,check X			
or			
If the committee is spending more than 50% federal funds, indicate ratio below			
Federal%			
Nonfederal%			
This ratio applies to (check all that apply):			
Administrative X Generic Voter Drive Public Communications Referencing Party Only			

#### SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS PAGE 27 / 36

NAME OF COMMITTEE (In Full)

**Federal Independent Campaign Committee** 

#### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- FUNDRISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

using a time/space method.		
ACTIVITY OR EVENT IDENTIFIER  Advertising Pioneer Press (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.94 %
X New Revised Same as Previously Reported		Transaction ID: H2.5035
ACTIVITY OR EVENT IDENTIFIER  Advertising Pioneer Press (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.94 %
New X Revised Same as Previously Reported		Transaction ID: H2.5043
ACTIVITY OR EVENT IDENTIFIER  Advertising Pioneer Press (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	5.58 %	94.42 %
New X Revised Same as Previously Reported		Transaction ID: H2.5100
ACTIVITY OR EVENT IDENTIFIER  Advertising Sun-Times (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.91 %
X New Revised Same as Previously Reported		Transaction ID: H2.5033
ACTIVITY OR EVENT IDENTIFIER  Advertising Sun-Times (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.91 %
New X Revised Same as Previously Reported		Transaction ID: H2.5042
ACTIVITY OR EVENT IDENTIFIER Advertising Sun-Times (01/24/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	9.35 %	90.65 %
New X Revised Same as Previously Reported		Transaction ID: H2.5101

#### SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)

**Federal Independent Campaign Committee** 

#### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- FUNDRISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

using a time/space method.		
ACTIVITY OR EVENT IDENTIFIER  Literature (03/08/2006)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	8.17 %	91.83 %
New X Revised Same as Previously Reported		Transaction ID: H2.5102
ACTIVITY OR EVENT IDENTIFIER Literature (03/08/2006)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE BATIO IS:	0.00 %	100.00 %
New X Revised Same as Previously Reported		Transaction ID: H2.5103
ACTIVITY OR EVENT IDENTIFIER  Literature Printing (02/13/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.94 %
X New Revised Same as Previously Reported		Transaction ID: H2.5044
ACTIVITY OR EVENT IDENTIFIER  Literature Printing (02/13/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	8.17 %	91.83 %
New X Revised Same as Previously Reported		Transaction ID: H2.5104
ACTIVITY OR EVENT IDENTIFIER  Mailhouse (01/22/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	%	99.96 %
X New Revised Same as Previously Reported		Transaction ID: H2.5046
ACTIVITY OR EVENT IDENTIFIER  Mailhouse (01/22/2008)	FEDERAL %	NONFEDERAL %
ACTIVITY IS:  Fundraising  X  Direct Candidate Support  CHECK IF THE RATIO IS:	8.17 %	91.83 %
New X Revised Same as Previously Reported		Transaction ID: H2.5105

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#### SCHEDULE H2 (FEC Form 3X)

LLOCATION RATIOS	PAGE 29 / 36

NAME OF COMMITTEE (In Full)

**Federal Independent Campaign Committee** 

#### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- FUNDRISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

and nonfederal candidates, regardless of whether there is a reference to a politic using a time/space method.	al party. Such expenses are a	llocated
ACTIVITY OR EVENT IDENTIFIER  Mailing (01/22/2008)  ACTIVITY IS:  Fundraising X Direct Candidate Support	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:  X New Revised Same as Previously Reported		Transaction ID: H2.5048
ACTIVITY OR EVENT IDENTIFIER  Mailing (01/22/2008)  ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising X Direct Candidate Support  CHECK IF THE RATIO IS:	8.17 %	91.83 %
New X Revised Same as Previously Reported		Transaction ID: H2.5106

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OR LINE 18a OF FORM 3	1
	OR LINE 18a OF FORM 3

NAME OF COMMITTEE (In Full)		FOR LINE TOU OF FORIVI 3A
Federal Independent Campaign Committee		
T cacrai masponaem campaign committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Independent Campai- gn Committee	M M / D D / Y Y Y Y Y Y 2008	10000.00
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		10000.00 Transaction ID: H3.4983
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event	Identifier)	
a)	_	Transaction ID:
b)		Transaction ID:
v) Direct Candidate Support (List of Activity	y or Event Identifier)	Transaction ID:
b)	_	Transaction ID:
c) Total Amount Transferred For Direct Ca	andidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	Transaction ID:
TOTALS	S FOR BREAKDOWN OF TRANSFER RECEIV	
TOTAL This Period (Administrative)		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)	L	
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring	Only to Party)	
TOTAL This Period (Total Amount Transferred)		

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FOR LINE 18a OF FORM 3X
AL AMOUNT TRANSFERRED
5000.00
5000.00 saction ID: H3.4985
saction ID:
saction ID:
saction ID:
saction ID:
saction ID:
saction ID:
ction ID:

IAME OF COMMITTEE (In Full)		
Federal Independent Campaign Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Independent Campai- gn Committee	01 / 23 / Y Y Y Y Y	5000.00
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		5000.00
		Transaction ID: H3.4985
ii) Generic Voter Drive		
		Transaction ID:
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Id	entifier)	Transaction ID:
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundra	aising	
v) Direct Candidate Support (List of Activity of	r Event Identifier\	
V) Birect Garianate Support	a Evolution (in the control of the c	
a <u>)</u>	_	Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Cand	didate Support	
vi) Public Communications Referring Only to	Party (Made by PAC)	
, rabic communications recoming only to	(a.e e) e)	Transaction ID:
TOTALS	FOR BREAKDOWN OF TRANSFER REC	EIVED
TOTAL This Devied (Administrative)		
TOTAL This Period (Administrative)		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring Or	nly to Party)	
TOTAL This Period (Total Amount Transferred)		

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FOR LINE 18a OF FORM 3X	١

NAME OF COMMITTEE (In Full)		,
Federal Independent Campaign Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Independent Campai- gn Committee	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	10000.00
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		10000.00 Transaction ID: H3.4986
		Transaction ib. 113.4900
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		
iii, Exempt returnes illininiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		Transaction ID:
iv) Direct Fundraising (List Activity or Event Ide	ntifier)	
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundrai  v) Direct Candidate Support (List of Activity or  a)	Event Identifier)	Transaction ID:
c) Total Amount Transferred For Direct Candi vi) Public Communications Referring Only to		
		Transaction ID:
	OR BREAKDOWN OF TRANSFER RECE	IVED
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring Onl	ly to Party)	
TOTAL This Period (Total Amount Transferred)		

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)		PORTEINE FOR OF FORMION
Federal Independent Campaign Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Independent Campai- gn Committee	M M / D D / Y Y Y Y Y D D / Y 2008	2401.34
BREAKDOWN OF TRANSFER RECEIVED		2,21,21
i) Total Administrative	2401.34 Transaction ID: H3.4997	
ii) Generic Voter Drive		
, , , , , , , , , , , , , , , , , , , ,	Transaction ID:	
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event	ldentifier)	Transaction ID:
,		1
a)		Transaction ID:
		1
b)		Transaction ID:
c) Total Amount Transferred for Direct Fund	Iraising	
v) Direct Candidate Support (List of Activity	or Event Identifier)	
		Transaction ID:
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Ca	ndidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	
		Transaction ID:
TOTALS	S FOR BREAKDOWN OF TRANSFER RECEIV	/ED
TOTAL This Period (Administrative)		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring	Only to Party)	
TOTAL This Period (Total Amount Transferred)		

#### SCHEDULE H3 (FEC Form 3X) T Α

RANSFERS FROM NONFEDERAL A LLOCATED FEDERAL / NONFEDER		PAGE 34 / 36 FOR LINE 18a OF FORM 3
AME OF COMMITTEE (In Full)		TOTAL TOUGHT OF THE
ederal Independent Campaign Committee		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Independent Campai- gn Committee	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	355.85
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative	355.85 <b>Transaction ID:</b> H3.5107	
ii) Generic Voter Drive	Transaction ID:	
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Ide	entifier)	Transaction ID:
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundrai  v) Direct Candidate Support (List of Activity or	-	
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Cand	lidate Support	
vi) Public Communications Referring Only to	Party (Made by PAC)	Transaction ID:
TOTALS F	OR BREAKDOWN OF TRANSFER REC	
OTAL This Period (Administrative)	27757.19	
OTAL This Period (Generic Voter Drive)	0.00	
OTAL This Period (Exempt Activities)		0.00
OTAL This Period (Direct Fundraising)		0.00
OTAL This Period (Direct Candidate Support)	0.00	
OTAL This Period (Public Communications Referring On	ly to Party)	27757.19

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

PAGE	3	5/3	36	
FOR	LINE	21a	OF	FORM 3X

	- <del> </del>		FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			, , , , , , , , , , , , , , , , , , , ,
Federal Independent Campaign Commi	ittee		
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Aviva Miriam Patt	Administrative Fundraising Exempt		
Mailing Address			☐ Voter Drive ☐ Direct Candidate Support
2719 N Albany City State	Zip Code	Τ	Public Comm (ref to party only) by PAC
Chicago IL	60647	001	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Contractual Work		Category/	1000.00
Activity or Event Identifier: Administrative		Type	Date 0 2 0 8 2 0 0 8  Transaction ID: H4.5004
FEDERAL SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
500.00		500.00	1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Chicago Sun-Times			Type of Allocated Activity:  Administrative Fundraising Exempt
Mailing Address			Voter Drive X Direct Candidate Support
350 N Orleans City State	Zip Code		Public Comm (ref to party only) by PAC
Chicago IL	60654	004	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Newspaper Ad		Category/ Type	5521.00
Activity or Event Identifier: Advertising Pioneer Press(01/24/2008) (Sch.E)[Federal Memo]			Date 0 1 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE 307.82	+ NONFEDERAL	5213.18	= TOTAL AMOUNT 5521.00
C. Full Name (Last, First, Middle Initial) Chicago Sun-Times			Type of Allocated Activity:  Administrative Fundraising Exempt
Mailing Address			Voter Drive X Direct Candidate Support
350 N Orleans	7'. 0. 4.	1	Public Comm (ref to party only) by PAC
City State Chicago IL	Zip Code 60654	004	Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Newspaper Ad		Category/	8910.00
Activity or Event Identifier: Advertising Sun-Times(01/24/2008) (Sch.E)[Federal Memo]		Type	Date 0 1 2 4 2 0 0 8  Transaction ID: H4.5078
FEDERAL SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
833.00		8077.00	8910.00
OUDTOTAL of Allegated Forders Land Nov Fords	and Anti-the Thin Dean		
SUBTOTAL of Allocated Federal and NonFede	, ,	0==	
FEDERAL SHARE	+ NONFEDERAL		= TOTAL AMOUNT
500.00		13790.18	14290.18
TOTAL This Period (last page for each line on FEDERAL SHARE	ly)(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

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

PAGE	3	6/3	36	
FOR	LINE	21a	OF	FORM 3X

I EBERIAL/ROM EBERIAL AGTIVITI			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			,
Federal Independent Campaign Committee			
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Des Plaines Publishing			Administrative Fundraising Exempt
Mailing Address			Voter Drive X Direct Candidate Support
1000 Executive Way	7. 0 .	1	Public Comm (ref to party only) by PAC
City State Des Plaines IL	Zip Code 60018	006	Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	00010		,
Printing		Category/ Type	2907.00
Activity or Event Identifier: Literature Printing(02/13/2008) (Sch.E)[Federal Memo]			Date 0 2 2 7 2 7 2 0 0 8 Transaction ID: H4.5080
FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
237.56		2669.44	2907.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mailing Concept Solutions			Type of Allocated Activity: Administrative Fundraising Exempt
Mailing Address			Voter Drive X Direct Candidate Support
7224 W 60th St City State	Zip Code	T	Public Comm (ref to party only) by PAC
City State Summit IL	60501	006	Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	00001		1950.00
Mailing		Category/ Type	1930.00
Activity or Event Identifier: Mailhouse(01/22/2008)			Date 0 1 2 2 7 2 0 0 8
(Sch.E)[Federal Memo]  FEDERAL SHARE +	NONFEDERAL	SHARE	Transaction ID: H4.5091  = TOTAL AMOUNT
159.37	NON EBEINE	1790.63	1950.00
C. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Postmaster			Administrative Fundraising Exempt
Mailing Address			Voter Drive X Direct Candidate Support
City State	Zip Code	006	Public Comm (ref to party only) by PAC
Chicago IL  Purpose of Disbursement:		000	Allocated Activity or Event Year-To-Date
i dipose di Disbuisement.		Category/ Type	10333.88
Activity or Event Identifier:		. , , , ,	M M / D D / Y Y Y Y
Mailing(01/22/2008)			
(Sch.E)[Federal Memo]			Date 0 1 2 2 2 0 0 8 Transaction ID: H4.5125
(Sch.E)[Federal Memo] FEDERAL SHARE +	NONFEDERAL	SHARE	Transaction ID:
	NONFEDERAL	SHARE 9489.26	Transaction ID: H4.5125
FEDERAL SHARE + 844.62	1 1 1 1 1	1 1 1 1	Transaction ID: H4.5125 = TOTAL AMOUNT
FEDERAL SHARE + 844.62  SUBTOTAL of Allocated Federal and NonFederal Acti	vity This Page	9489.26	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88
FEDERAL SHARE +  844.62  SUBTOTAL of Allocated Federal and NonFederal Acti  FEDERAL SHARE +	vity This Page  NONFEDERAL	9489.26 SHARE	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88  = TOTAL AMOUNT
FEDERAL SHARE + 844.62  SUBTOTAL of Allocated Federal and NonFederal Acti	vity This Page  NONFEDERAL	9489.26	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88
FEDERAL SHARE +  844.62  SUBTOTAL of Allocated Federal and NonFederal Acti FEDERAL SHARE +  0.00  TOTAL This Period (last page for each line only)(Federal SHARE)	vity This Page  NONFEDERAL  1 eral share to 21(a)(i) and	9489.26 SHARE 3949.33 NonFederal shar	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88  = TOTAL AMOUNT  13949.33  re to 21(a)(i))
FEDERAL SHARE +  844.62  SUBTOTAL of Allocated Federal and NonFederal Acti FEDERAL SHARE +  0.00  TOTAL This Period (last page for each line only)(Federal SHARE)	vity This Page NONFEDERAL 1	9489.26 SHARE 3949.33 NonFederal shart	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88  = TOTAL AMOUNT  13949.33  re to 21(a)(i))  TOTAL AMOUNT
FEDERAL SHARE +  844.62  SUBTOTAL of Allocated Federal and NonFederal Acti  FEDERAL SHARE +  0.00  TOTAL This Period (last page for each line only)(Federal SHARE)	vity This Page  NONFEDERAL  1 eral share to 21(a)(i) and	9489.26 SHARE 3949.33 NonFederal shar	Transaction ID: H4.5125  = TOTAL AMOUNT  10333.88  = TOTAL AMOUNT  13949.33  re to 21(a)(i))