		-		PAGE 1 / 54
ND DISBURS	SEMENT	S	Office U	se Only
PE OR PRINT V	Example: If typir over the lines.	ng, type		
Suite 300				
Downers Grove			6051	5
SER V CITY	A	STAT	E 🔺	ZIP CODE
			AMENDED (A)	
Report Due On: (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	0 (M3) 0 0 (M4) 0 0 Primary (12F 0 Convention (0 On M M 7 General (300)	Jun 20 (M6) Jul 20 (M7) ?) 12C) A)	Runoff (30R)	In the State of Special (30S)
16 2014	through	11	24 20	
-	y movieuge and i			
. McCormick	[Electronically	<i>y Filed]</i> Date	12 / D4	2014
, or incomplete information r	nay subject the per	son signing this Re	eport to the penalt	ies of 2 U.S.C. §437g.
				FORM 3X Rev. 12/2004
	ND DISBURS Other Than An Author PE OR PRINT ▼ TD PAC 100 West 31ST Street Suite 300 Downers Grove BER ▼ CITY 3. IS T Report CITY 3. IS T (b) Monthly Feb 20 Due On: Mar 20 (c) 12-Day PRE-Election Report for the: Election (d) 30-Day POST-Election Report for the: Election (c) 12-Day POST-Election Report for the: Election (c) 12-Day POST-Election Report and to the best of m Michael K. McCormick </td <td>ND DISBURSEMENT Other Than An Authorized Committee Committee</td> <td>100 West 31ST Street 100 West 31ST Street Suite 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 OB Owners Grove IL 3. IS THIS REPORT May 20 (M5) Present Due On: Mar 20 (M3) Jul 20 (M7) (c) 12-Day PRE-Election Report for the: Convention (12C) Election on III (d) 30-Day POST-Election Report for the: Election on III (d) 30-Day POST-Election Report and to the best of my knowledge and belief it is true, cor Michael</td> <td>ND DISBURSEMENTS Other Than An Authorized Committee Otice U PE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5 TD PAC 100 West 31ST Street 12FE4M5 Suite 300 000 100 West 31ST Street 100 West 31ST Street Suite 300 000 000 000 000 Downers Grove IL 6051 Street CITY ▲ STATE ▲ 3. IS THIS REPORT NEW (N) AMENDED (A) Ber ▼ CITY ▲ STATE ▲ 3. IS THIS REPORT NEW (N) OR AMENDED (A) (b) Monthly Report Feb 20 (M2) May 20 (M5) Aug 20 (M8) Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Due On: Mar 20 (M3) Jun 20 (M7) Oct 20 (M10) (c) 12 D General (12G) PRE-Election Report for the: Convention (12C) Special (12S) Election on 11 C 24 C 2014 2014 2014 (d) 30-Day General (30G) Runoff (30R) Report for the: 2014 2014 2014 2014 <</td>	ND DISBURSEMENT Other Than An Authorized Committee	100 West 31ST Street 100 West 31ST Street Suite 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 Downers Grove IL 3. IS THIS REPORT Xinte 300 OB Owners Grove IL 3. IS THIS REPORT May 20 (M5) Present Due On: Mar 20 (M3) Jul 20 (M7) (c) 12-Day PRE-Election Report for the: Convention (12C) Election on III (d) 30-Day POST-Election Report for the: Election on III (d) 30-Day POST-Election Report and to the best of my knowledge and belief it is true, cor Michael	ND DISBURSEMENTS Other Than An Authorized Committee Otice U PE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5 TD PAC 100 West 31ST Street 12FE4M5 Suite 300 000 100 West 31ST Street 100 West 31ST Street Suite 300 000 000 000 000 Downers Grove IL 6051 Street CITY ▲ STATE ▲ 3. IS THIS REPORT NEW (N) AMENDED (A) Ber ▼ CITY ▲ STATE ▲ 3. IS THIS REPORT NEW (N) OR AMENDED (A) (b) Monthly Report Feb 20 (M2) May 20 (M5) Aug 20 (M8) Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Due On: Mar 20 (M3) Jun 20 (M7) Oct 20 (M10) (c) 12 D General (12G) PRE-Election Report for the: Convention (12C) Special (12S) Election on 11 C 24 C 2014 2014 2014 (d) 30-Day General (30G) Runoff (30R) Report for the: 2014 2014 2014 2014 <

12/04/2014 08 : 29

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

DuPage Medical Group LTD PAC

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		174940.53
	(b) Cash on Hand at Beginning of Reporting Period	186137.70	
	(c) Total Receipts (from Line 19)	4342.59	37539.76
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	190480.29	212480.29
7.	Total Disbursements (from Line 31)	0.00	22000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	190480.29	190480.29
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

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D FEC Form 3X (Rev. 06/2004)	ETAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name		
DuPage Medical Group LTD PAC		
Report Covering the Period: From: 10		11 / D D / Y Y Y Y 11 24 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Contributions (other than loans) From: (a) Individuals/Persons Other 	· · · · ·	
Than Political Committees (i) Itemized (use Schedule A)	4342.59	27106.54
(ii) Unitemized (iii) TOTAL (add	, 0.00	10433.22
Lines 11(a)(i) and (ii)	4342.59	37539.76
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	4342.59	37539.76
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.)(Carry Totals to Line 37, page 5)16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees 17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	4342.59	37539.76
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	4342.59	37539.76

DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A Total This Period	COLUMN B
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))►	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	7000.00
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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
(SUCH as TAOS)	7 7 0.00	
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	0.00	15000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds (c) Total Federal Election Activity (add	0.00	0.00
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))	0.00	22000.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0.00	22000.00

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4342.59	37539.76
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4342.59	37539.76
add Line 21(a)(i) and Line 21(b))►	0.00	0.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
 Net Operating Expenditures (subtract Line 37 from Line 36) 	0.00	0.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

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TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD	PAC		
Full Name (Last, First, Middle Initial) Craig Anderson Mailing Address 3 Briar Ln City West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60185-3033 Year-to-Date ▼ 500.16	Date of Receipt
Full Name (Last, First, Middle Initial) Craig Anderson Mailing Address 3 Briar Ln City West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State IL Occupation Physician	Zip Code 60185-3033	Date of Receipt
Receipt For: Primary General Other (specify) ▼ General Curaig Anderson Mailing Address 3 Briar Ln City West Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	State IL Occupation Physician	Year-to-Date ▼ 500.16 Zip Code 60185-3033 Year-to-Date ▼	Date of Receipt 11 21 2014 Transaction ID : 05BA0362A6E646858B49 Amount of Each Receipt this Period 20.84
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional		500.16	62.52

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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PAGE

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		Detailed Summary Page		< 11a 13		11b 14	11c	12		7
Any information copied from such Reports and S or for commercial purposes, other than using the				for the	purpo	ose of	soliciting	g contrib	utions	7
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	AC									
Full Name (Last, First, Middle Initial) A. Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	State IL Occupation Physician Aggregate Ye	Zip Code 60137-6365			/ actio	24	/ Y 54FBFD eccipt th	nis Perio	4 BA 7A9	<u>944</u>
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Marc Asselmeier Mailing Address 750 Brentwood Ct		936.00		Date of	f Rec	ceipt	/ Y	- Y - Y	T Y	
City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	State IL Occupation Physician Aggregate Ye	Zip Code 60137-6365 ear-to-Date ▼ 936.00					6689DCI eccipt th	nis Perio		<u>)4</u>
Full Name (Last, First, Middle Initial) C. Marc Asselmeier Mailing Address 750 Brentwood Ct City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL Occupation Physician Aggregate Ye	Zip Code 60137-6365 ear-to-Date ▼ 936.00			/ actic	21	7743E93 eceipt th	nis Perio	80F8C4	<u>17</u>
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FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

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	COMMITTEE (In Full) e Medical Group LTD	PAC									
Full Name A. James C	(Last, First, Middle Initial) Collins				Date of	f Red	ceipt				
	dress 1673 Imperial Cir				м м 10	/	24			ү 014	Y
City Nonon <i>i</i> illo		State IL	Zip Code 60563-0132					D3F2C7			8EDAA1
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	mber of contributing tical committee.	C					,		_	39	.00
Name of E	mployer	Occupation	l								
	edical Group, Ltd.	Physician									
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Other	ary General r (specify) 🔻		936.00								
Full Name B. James ((Last, First, Middle Initial)				Date of	f Red	ceipt				
	dress 1673 Imperial Cir				M M	/	07)14	Y
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	mber of contributing tical committee.	С					7		_	39.	.00
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_	edical Group, Ltd.	Physician									
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	mber of contributing tical committee.	C					7	7	_	39	.00
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	edical Group, Ltd.	Physician									
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE

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		Detailed Summary Page		X 11a		11b	11c		12	
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Any information copied from such Reports or for commercial purposes, other than us										
NAME OF COMMITTEE (In Full)										
ight angle DuPage Medical Group LT	D PAC									
Full Name (Last, First, Middle Initial) A. David Dungan				Date o	f Re	ceint				
Mailing Address 211 Palamino Pl				M M		D) / Y	V	Y	Y
				10		24			014	
City	State	Zip Code		Trans	sacti	on ID :	02348A8	39A3	39049	<u>5AAA</u>
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Full Name (Last, First, Middle Initial)										
B. David Dungan				Date o		<u> </u>				
Mailing Address 211 Palamino Pl				11	1	07) / Y	_ 20	14	Y
City	State	Zip Code			acti		D1F90F0			3280
Wheaton	IL	60189-2046					Receipt th			.0200
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DuPage Medical Group, Ltd.	Physician									
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Primary General			11							
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Full Name (Last, First, Middle Initial) C. David Dungan				Date o	f Re	ceipt				
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DuPage Medical Group, Ltd.	Physician									
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P/	AC		
Α.	Full Name (Last, First, Middle Initial) Michael Fitzgerald Mailing Address 1207 Sanctuary Ln City	State	Zip Code	Date of Receipt
	Naperville	IL	60540-1936	Transaction ID : DFD330781D9D4AF893D3
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	DuPage Medical Group	Physician		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 936.00	
в.	Full Name (Last, First, Middle Initial) Michael Fitzgerald			Date of Receipt
	Mailing Address 1207 Sanctuary Ln			11 07 2014
	City	State	Zip Code	Transaction ID : 99D7D92E362F43638E36
	Naperville	IL	60540-1936	Amount of Each Receipt this Period
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	DuPage Medical Group	Physician		
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	Other (specify)		936.00	
с.	Full Name (Last, First, Middle Initial) Michael Fitzgerald			Date of Receipt
	Mailing Address 1207 Sanctuary Ln			11 21 2014
	City Naperville	State IL	Zip Code 60540-1936	Transaction ID : DC9B974702C54249A4EB
	· · · · · · · · · · · · · · · · · · ·		00040 1000	Amount of Each Receipt this Period
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	DuPage Medical Group	Physician		
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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTI	D PAC		
A. Thomas Gallagher Mailing Address 1105 Adelia St			Date of Receipt
City	State	Zip Code	10 24 2014
Downers Grove	IL	60516-2830	Transaction ID : 96862D7EA02F4872B652 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation		
DuPage Medical Group, Ltd.	Physician		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1200.00]
Full Name (Last, First, Middle Initial) B. Thomas Gallagher			Date of Receipt
Mailing Address 1105 Adelia St			11 07 2014
City	State	Zip Code	Transaction ID : C7B13DD43CDF487DAC5
Downers Grove	IL	60516-2830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer	Occupation		
DuPage Medical Group, Ltd.	Physician		
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		1200.00]
Full Name (Last, First, Middle Initial) C. Thomas Gallagher			Date of Receipt
Mailing Address 1105 Adelia St			M M / D D / Y Y Y Y 11 21 2014
City	State	Zip Code	Transaction ID: 774075F79FBF4EB8B9EE
Downers Grove	IL	60516-2830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer	Occupation		
DuPage Medical Group, Ltd.	Physician		
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	EMIZED RECEIPTS		Detailed Summary Page		-		11b	11c		12	
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or	for commercial purposes, other than using the	ne name and a	address of any political committee	e to so	olicit co	ntrib	outions	from suc	h co	mmitt	ee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P	AC									
<u> </u>	Full Name (Last, First, Middle Initial) Martin Gallo				Date o	f Re	eceipt				
	Mailing Address 118 Allen Ct				M M	/	DI			Y	Y
	City	State	Zip Code	_	10 Trans	act	24 ion ID ·	77B39B		014 F6 B4	828B4F
	Clarendon Hills	IL	60514-1466					Receipt th			
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	Other (specify) ▼		936.00]							
в.	Full Name (Last, First, Middle Initial) Martin Gallo				Date o	f Re	eceipt				
	Mailing Address 118 Allen Ct				M M	/	07			y 014	Y
	City	State	Zip Code		Trans	acti	ion ID :	67D2DE	:F26	CE64	D8F964I
	Clarendon Hills	IL	60514-1466		Amoun	t of	Each F	Receipt th	nis P	'eriod	
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	Other (specify) V		936.00								
<u>с</u> .	Full Name (Last, First, Middle Initial) Martin Gallo	1			Date o	f Re	eceipt				
	Mailing Address 118 Allen Ct				M M	/	21)14	Y
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	DuPage Medical Group, Ltd.	Physician									
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	Other (specify)		936.00								
s	UBTOTAL of Receipts This Page (optional))	<u> </u>			,	- 7	-	117.	00

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

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Any information copied from such Report or for commercial purposes, other than u									
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	-					butions	nom suc		liee.
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60137-6130 Year-to-Date ▼ 923.04	_		sac	tion ID		nis Period	26482F1
Full Name (Last, First, Middle Initial) B. John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60137-6130 Year-to-Date ▼ 923.04	_		sac	tion ID		nis Perioo	
Full Name (Last, First, Middle Initial) John Giardina Mailing Address 832 Abbey Dr City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60137-6130 Year-to-Date ▼ 923.04	_		sac	tion ID	1	nis Period	4F47A37C
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			Detailed Summary Page		11a		11	b	11c	12	
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$\left\langle \right\rangle$	DuPage Medical Group LTD PAC	x									
/	Ear age medical Group LTD FAC	•									
	Full Name (Last, First, Middle Initial)			\square							
Α.	L. Douglas Graham			[Date of	Re	ecei	ipt			
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	Ste. 107	State	Zip Code	- L	10 Trans		L	24		2014	7055000
	Oakbrook Terrace	IL	60181							2D5E9C4 his Period	
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	o 17	Physician									
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ď .	L. Douglas Graham			- [_	Date of		_	·			V
	Mailing Address 15224 Summit Ave. Ste. 107				M M	1	Γ	0 D	/ 7	_2014	Y
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٠.	Mailing Address 15224 Summit Ave.			\dashv			_	ıpι □ □ □	/	/ Y Y	Y
	Ste. 107				11	Ĺ		21	ĽĽ	2014	
	City	State	Zip Code							77A21041	
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	federal political committee.					-	7		7		
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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54

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		_		11b	11c	12	
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or for commercial purposes, other than us NAME OF COMMITTEE (In Full) DuPage Medical Group LT	-	ddress of any political committe	e to so	olicit co	ntri	butions	from suc	h commi	ttee.
Full Name (Last, First, Middle Initial) Glenn Grobe Mailing Address 719 Mesa Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60565-5312 Year-to-Date ▼ 360.00			sac	tion ID	1	his Period	1D28C6E
Full Name (Last, First, Middle Initial) B. Glenn Grobe Mailing Address 719 Mesa Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60565-5312 Year-to-Date ▼ 360.00			sact	tion ID		his Period	
Full Name (Last, First, Middle Initial) C. Glenn Grobe Mailing Address 719 Mesa Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate	Zip Code 60565-5312 Year-to-Date ▼ 360.00			sac	tion ID		his Perioo 1	541812C
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SCHEDULE A	(FEC Form 3X)
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ITEMIZED RECEIPTS	Detailed Summa		X 11a 11b 11c 12
Any information conied from such De			13 14 15 16 17 erson for the purpose of soliciting contributions
or for commercial purposes, other the	an using the name and address of any politic	cal committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group	LTD PAC		
A. Linda Gruener Mailing Address 8207 Gruener Ct	al)		Date of Receipt
			10 24 2014
City Delec Hills	State Zip Code IL 60465-2200		Transaction ID : 95A4C186F290477BA4E1
Palos Hills	IL 60465-2200		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer	Occupation		-
DuPage Medical Group, Ltd.	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
Other (specify)		2400.00	
Full Name (Last, First, Middle Initi B. Linda Gruener	al)		Date of Receipt
Mailing Address 8207 Gruener Ct			11 07 2014
City	State Zip Code		Transaction ID : CC2C8F398DF4431B9AB
Palos Hills	IL 60465-2200		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer	Occupation		
DuPage Medical Group, Ltd.	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
Other (specify) ▼		2400.00	
Full Name (Last, First, Middle Initi C. Linda Gruener	al)		Date of Receipt
Mailing Address 8207 Gruener Ct			11 21 2014
City	State Zip Code		Transaction ID : 98B576E9A6C84461B4A
Palos Hills	IL 60465-2200		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer	Occupation		
DuPage Medical Group, Ltd.	Physician		
Receipt For:	Aggregate Year-to-Date ▼	2400.00	
Other (specify)			
SUBTOTAL of Receipts This Page	optional)	····· ►	300.00

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FEC Schedule A (Form 3X) Rev. 02/2003

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	AC State IL Occupation Physician Aggregate	ddress of any political committee Zip Code 60540-6694	13 14 15 16 erson for the purpose of soliciting contribution to solicit contributions from such committee. Date of Receipt 10 24 2014 Transaction ID : A73BEB69931F4CEI Amount of Each Receipt this Period 21.00 Date of Receipt 11 07 2014
OF COMMITTEE (In Full) age Medical Group LTD P/ Ime (Last, First, Middle Initial) Address 640 S Washington St Ste 268 ville 0 number of contributing political committee. of Employer e Medical Group, Ltd. t For: Primary General Other (specify) ▼ Ime (Last, First, Middle Initial) a Hashmi Address 640 S Washington St	AC State IL Occupation Physician Aggregate	Zip Code 60540-6694 Year-to-Date ▼ 504.00	Date of Receipt 10 24 2014 Transaction ID : A73BEB69931F4CEI Amount of Each Receipt this Period 21.00 Date of Receipt MMM / D D / Y Y Y Y
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Ste 268 ville 0 number of contributing political committee. of Employer e Medical Group, Ltd. t For: Primary General Other (specify) ▼ ume (Last, First, Middle Initial) a Hashmi Address 640 S Washington St	IL Occupation Physician Aggregate	60540-6694 Year-to-Date ▼ 504.00	10 24 2014 Transaction ID : A73BEB69931F4CE Amount of Each Receipt this Period 21.00 21.00 21.00 Date of Receipt 21.00 M M / D D / Y Y Y Y
o number of contributing political committee. of Employer e Medical Group, Ltd. t For: Primary General Other (specify) ▼ ume (Last, First, Middle Initial) a Hashmi Address 640 S Washington St	IL Occupation Physician Aggregate	60540-6694 Year-to-Date ▼ 504.00	Amount of Each Receipt this Period
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e Medical Group, Ltd. t For: Primary General Other (specify) ▼ me (Last, First, Middle Initial) a Hashmi Address 640 S Washington St	Physician Aggregate	Year-to-Date ▼ 504.00	M M / D D / Y Y Y Y Y
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Address 640 S Washington St	Ciata		M M / D D / Y Y Y Y Y
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	Ctoto		- 2014
ville	State IL	Zip Code 60540-6694	Transaction ID : D99B989E5EE44C3E Amount of Each Receipt this Period
) number of contributing political committee.	С		21.00
of Employer e Medical Group, Ltd.	Occupation Physician		
t For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 504.00	
me (Last, First, Middle Initial) a Hashmi	<u>.</u>		Date of Receipt
Address 640 S Washington St Ste 268			11 21 2014
ville	State IL	Zip Code 60540-6694	Transaction ID : 49FCFFA19C714D22 Amount of Each Receipt this Period
) number of contributing political committee.	С		21.00
of Employer	Occupation		-
e Medical Group, Ltd.	Physician		_
t For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 504.00	
	political committee. of Employer a Medical Group, Ltd. t For: Primary ☐ General Other (specify) ▼ me (Last, First, Middle Initial) a Hashmi Address 640 S Washington St Ste 268 ville 0 number of contributing political committee. of Employer e Medical Group, Ltd. t For: Primary ☐ General Other (specify) ▼	political committee. of Employer a Medical Group, Ltd. t For: Primary General Other (specify) a Hashmi Address 640 S Washington St Ste 268 ville IL O number of contributing political committee. of Employer e Medical Group, Ltd. of Employer of Employer e Medical Group, Ltd. Other (specify)	political committee. of Employer a Medical Group, Ltd. t For: trimary General Other (specify) ▼ Aggregate Year-to-Date ▼ for Employer a Hashmi Address 640 S Washington St State State Zip Code IL 60540-6694 Onumber of contributing political committee. of Employer e Medical Group, Ltd. t For: Primary General Other (specify) ▼ State Zip Code IL 60540-6694 C Occupation Physician Aggregate Year-to-Date ▼ Finary General Other (specify) ▼ State Sta

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	y information copied from such Reports and for commercial purposes, other than using t							se of				
$\left\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC										
<u>к</u>	Full Name (Last, First, Middle Initial) Maleeha Hashmi-Basha				Date of	f Re	ecei	ipt				
	Mailing Address 640 S Washington St Ste 268				M M	/	ľ	24	/		014	Y
	City	State	Zip Code		Trans	acti	ion		821DC			7A4BD
	Naperville	IL	60540-6694		Amount							
	FEC ID number of contributing federal political committee.	С					7				20.	00
	Name of Employer	Occupation										
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		480.00	1								
	Full Name (Last, First, Middle Initial) Maleeha Hashmi-Basha				Date of	f Re	ecei	ipt				
	Mailing Address 640 S Washington St Ste 268				M M	1	E	07	1)14	Y
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	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 480.00]								
<u>с.</u>	Full Name (Last, First, Middle Initial) Maleeha Hashmi-Basha				Date of	f Re	ecei	ipt				
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	Name of Employer	Occupation										
	DuPage Medical Group, Ltd.	Physician										
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC		
A.	Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60189-2020 Year-to-Date ▼ 1000.08	Date of Receipt
в.	Full Name (Last, First, Middle Initial) James Hermann Mailing Address 1962 Hampton Dr			Date of Receipt
	City	State	Zip Code	Transaction ID : 64B87A140110499B9093
	Wheaton	IL	60189-2020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer	Occupation	1	
	DuPage Medical Group, Ltd.	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.08	
с.	Full Name (Last, First, Middle Initial) James Hermann			Date of Receipt
	Mailing Address 1962 Hampton Dr			M M / D D / Y Y Y Y 11 21 2014
	City Wheaton	State IL	Zip Code 60189-2020	Transaction ID : 76D1F20EED4A4638A0D3
			00109-2020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer	Occupation	1	
	DuPage Medical Group, Ltd.	Physician		_
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-	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and s for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P	٩C		
Α.	Full Name (Last, First, Middle Initial) Te-Shao Hsu Mailing Address 1155 N Dearborn St Apt. 804			Date of Receipt
	City Chicago	State IL	Zip Code 60610-6539	Transaction ID : 7A8E9370A88E435AB477 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		39.00
	Name of Employer	Occupation	1	
	DuPage Medical Group, Ltd.	Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 936.00	
В.	Full Name (Last, First, Middle Initial) Te-Shao Hsu			Date of Receipt
	Mailing Address 1155 N Dearborn St Apt. 804			11 07 2014
	City	State	Zip Code	Transaction ID : 986BEB94EFC14CB59FDD
	Chicago	IL	60610-6539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		39.00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	1	
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	Primary General Other (specify) ▼		936.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Te-Shao Hsu			Date of Receipt
	Mailing Address 1155 N Dearborn St Apt. 804			11 21 2014
	City	State	Zip Code	Transaction ID : 5439248FA67145C787B9
	Chicago	IL	60610-6539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		39.00
	Name of Employer	Occupation	1	
	DuPage Medical Group, Ltd.	Physician		
	Receipt For:	Aggregate	Year-to-Date V	
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	AC	
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date ▼ 936.00 936.00	Date of Receipt
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date ▼ 936.00	Date of Receipt
Full Name (Last, First, Middle Initial) Robert Hurst Mailing Address 1348 Richmond Ln City Bartlett FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60103-8939 C Occupation Physician Aggregate Year-to-Date ▼ 936.00	Date of Receipt
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				13		14	15	16	17
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NAME OF COMMITTEE (In Full)									
> DuPage Medical Group LT	D PAC								
Full Name (Last, First, Middle Initial)									
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Mailing Address 1510 N Bosworth Ave #3				м м м	1	24	/ Y	2014	Y
City	State	Zip Code			act		27D13A	AC13134)76BA0
Chicago	IL	60642-7612						nis Period	
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Name of Employer	Occupation	1	_						
DuPage Medical Group, Ltd.	Physician								
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		480.00							
Full Name (Last, First, Middle Initial) 3. Cameron Jirschele			D	ate of	Re	eceipt			
Mailing Address 1510 N Bosworth Ave #3				M ■ M 1_1	1	07	/ Y	2014	Y
City	State	Zip Code		Transa	act	ion ID : (4CF4E	B19D6141	9CB2E
Chicago	IL	60642-7612	A	mount	of	Each Re	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С					7	7	20	.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician								
Receipt For:		Year-to-Date ▼	-						
Primary General Other (specify) ▼	Aggregate	480.00							
Full Name (Last, First, Middle Initial)				ate of					
Mailing Address 1510 N Bosworth Ave #3				M M		21	/ Y	2014	Y
City	State	Zip Code	1.5		act		3306CB	DEA8BF4	B7C9B
Chicago	IL	60642-7612						nis Period	
FEC ID number of contributing federal political committee.	C				1				.00
Name of Employer	Occupation	1	_						
DuPage Medical Group, Ltd.	Physician								
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		480.00							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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TTEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	and Statements may not be sold or used by any p sing the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	D PAC	
Full Name (Last, First, Middle Initial) A. Richard Krouse Mailing Address 4720 Lee Ave City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60515-3319 C Occupation Physician Aggregate Year-to-Date ▼ 480.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Richard Krouse Mailing Address 4720 Lee Ave		Date of Receipt
City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd.	State Zip Code IL 60515-3319 C Occupation Physician	Transaction ID : 6670EE5804F7430FA568 Amount of Each Receipt this Period 20.00
Receipt For: Primary General Other (specify) v	Aggregate Year-to-Date ▼ 480.00]
C. Full Name (Last, First, Middle Initial) Mailing Address 4720 Lee Ave	State Zip Code	Date of Receipt
Downers Grove FEC ID number of contributing federal political committee.	IL 60515-3319	Amount of Each Receipt this Period
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 480.00]
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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Any information copied from such Reports a or for commercial purposes, other than usin							of solicit		ntributi	ions
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD	PAC									
Full Name (Last, First, Middle Initial) A. Norman Kumins Mailing Address 677 Duane St City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60137-4611 Year-to-Date ▼ 858.00			sact	24	4	20 AA7EE		¥ 17 D84BE
B. Full Name (Last, First, Middle Initial) Mailing Address 1312 S Ridge Rd					of Re	D	D /		Y	Ŷ
City Willowbrook FEC ID number of contributing	State IL	Zip Code 60527-1896							BC64/	AE59962 83
federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician	Year-to-Date ▼ 499.92]			<u>y</u>	7			
Full Name (Last, First, Middle Initial) C. David Labotka				Date c	of Re	eceipt				
Mailing Address 1312 S Ridge Rd City Willowbrook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: □ Primary □ General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60527-1896 Year-to-Date ▼ 499.92			sact		7	20 07FD91	DC42	8 BAD7F
SUBTOTAL of Receipts This Page (optional	al)				-	7		_	80.6	66

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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ITEINIZED RECEIPTS		Detailed Summary Page		< 11a		11b	11c		12	
Any information copied from such Re	ports and Statements ma	Ay not be sold or used by any p	person	13 for the	pu	14 rpose o	15 of solicitin	ig co	16 16	17 tions
or for commercial purposes, other th NAME OF COMMITTEE (In Full) DuPage Medical Group		address of any political committe	e to s	olicit co	ontril	outions	from suc	n cc	ommitt	ee.
Full Name (Last, First, Middle Init David Labotka Mailing Address 1312 S Ridge Rd City Willowbrook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician	Zip Code 60527-1896 Year-to-Date ▼ 499.92			sact	21 tion ID		2 3FA 1	Period	
B. Full Name (Last, First, Middle Init Aaron Lazar Mailing Address 1564 Abbotsford			_	Date o	of R	eceipt			014	Y
City Naperville	State IL	Zip Code 60563-2088	_	Trans		tion ID	: 4F78A3 Receipt t	2EE	E404C	D2BBF
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Full Name (Last, First, Middle Init C. Aaron Lazar	al)			Date o	of R	eceipt				
Mailing Address 1564 Abbotsford	Dr			M M		. 07			014	Y
City Naperville	State IL	Zip Code 60563-2088		Tran		tion ID	: CC5908 Receipt t	8144	6A64/	\64A7C8
FEC ID number of contributing federal political committee.	C					7		_	25	.00
Name of Employer	Occupation	1								
DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Physician Aggregate	Year-to-Date ▼ 600.00]							
SUBTOTAL of Receipts This Page	 (optional)					7		_	70.	83

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

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TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13	11b	11c	12	17
Any information copied from such Report or for commercial purposes, other than u				or the	purpose	of soliciting	g contribu	utions
NAME OF COMMITTEE (In Full) DuPage Medical Group L	TD PAC							
✓ Full Name (Last, First, Middle Initial) A. Aaron Lazar Mailing Address 1564 Abbotsford Dr City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL Occupation Physician Aggregate	Zip Code 60563-2088 //ear-to-Date ▼ 600.00		M M 11 Trans	2 action ID		nis Period	2B2A15F
Full Name (Last, First, Middle Initial) B. Thomas Lee Mailing Address 385 Maple St		j		Date of	f Receipt	D / Y	Y Y	Y
City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer	State IL Occupation	Zip Code 60137-3811			action ID	: 0BE60D Receipt th	nis Period	
DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Physician Aggregate Y	'ear-to-Date ▼ 480.00]					
C. Full Name (Last, First, Middle Initial) Mailing Address 385 Maple St				Date of	f Receipt	D / Y	YYY	Y
City Glen Ellyn FEC ID number of contributing federal political committee.	State IL	Zip Code 60137-3811	A		action ID)7) : AF2D75 Receipt th	nis Period 20	1 D.00
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician	′ear-to-Date ▼ 480.00			<u> </u>			
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SCHEDULE A	(FEC	Form	3X)
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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TIEWIZED RECEIPTS			Detailed Summary Page		11a		11b		11c 15		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the			for the		pose		oliciting		ntribut	tions	
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	VC										
<u> </u>	Full Name (Last, First, Middle Initial) Thomas Lee				Date o	f Re	eceipt					
	Mailing Address 385 Maple St				M M	_	D		/ Y)14	Y
	City	State	Zip Code			sact			C5C7D			28E9C1
	Glen Ellyn	IL	60137-3811		Amoun	t of	Each	Rec	ceipt th	nis Po	eriod	
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	Name of Employer	Occupation	1									
	DuPage Medical Group, Ltd.	Physician										
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	Primary General	ggi oguto										
	Other (specify)	L	480.00									
В.	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt					
	Mailing Address 416 S Sleight St				м м 10		D		/ Y	_ 20	Y 14	Y
	City	State	Zip Code			acti			31D212			32FAB49
	Naperville	IL	60540-5441		Amoun							
	FEC ID number of contributing federal political committee.	С					7				39.	.00
	Name of Employer	Occupation	1	_								
	DuPage Medical Group, Ltd.	Physician										
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	Primary General	riggi oguto		11.								
	Other (specify)	L	936.00									
<u>с</u> .	Full Name (Last, First, Middle Initial) Ernest Lizek				Date o	f Re	eceipt					
	Mailing Address 416 S Sleight St				м м 11	/		D 07	/ Y	20	ү 14	Y
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s	UBTOTAL of Receipts This Page (optional)						3		7		98.	00

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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Any information copied from such or for commercial purposes, other	than using the name and a	ay not be sold or used by any p address of any political committe	e to s	for the olicit co	pui ontril	rpose c outions	of solicitin	ig co ch co	ontribut	ions ee.
NAME OF COMMITTEE (In Fu DuPage Medical Grou										
Full Name (Last, First, Middle I A. Ernest Lizek	nitial)			Date c	of Re	eceipt				
Mailing Address 416 S Sleight S	St			M N		2			014	Y
City Naperville	State IL	Zip Code 60540-5441		Tran		tion ID	: 301970 Receipt t	AD6	27346	C88AA6
FEC ID number of contributing federal political committee.	C					,		_	39	.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	1								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 936.00]							
Full Name (Last, First, Middle I B. Gerald Maida				Date c	of Re	eceipt				
Mailing Address 30 Stratford Dr				10	/	24			ү 014	Υ
City Bloomingdale	State IL	Zip Code 60108-2201					: 33B6FF Receipt t			152831A
FEC ID number of contributing federal political committee.	C					л. I		_	10.	.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	1								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 240.00								
Full Name (Last, First, Middle I c. Gerald Maida	nitial)			Date c	of Re	eceipt				
Mailing Address 30 Stratford D				M N 11	1	D 07			ү 014	Y
City Bloomingdale	State IL	Zip Code 60108-2201					: 691F65 Receipt t			F6B864
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Name of Employer DuPage Medical Group, Ltd.	Occupation Physician	1								
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Other (specify)		240.00								
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		×	11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and St for commercial purposes, other than using the					or the		pose o	f solicitir		ntribut	tions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	С										
A.	Full Name (Last, First, Middle Initial) Gerald Maida					Date of	f Re	eceipt				
	Mailing Address 30 Stratford Dr					м – м 11	/	21			014	Y
	City	State	Zip Code		1 '		act					230B9FA
	Bloomingdale	IL	60108-2201			Amount	t of	Each I	Receipt	this F	eriod	
	FEC ID number of contributing federal political committee.	С						,	7	_	10	.00
	Name of Employer	Occupation										
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		240.0	00								
в.	Full Name (Last, First, Middle Initial) Alicia Martin				[Date of	f Re	eceipt				
	Mailing Address 235 W Van Buren St Unit 1711					м м 10	1	24) 014	Y
	City	State	Zip Code									76590BA
	Chicago	IL	60607-3932			Amoun	t of	Each I	Receipt	this F	'eriod	
	FEC ID number of contributing federal political committee.	С						7		_	10	.00
	Name of Employer	Occupation			1							
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		, 240.0	00								
с.	Full Name (Last, First, Middle Initial)					Date of	f Re	eceipt				
	Mailing Address 235 W Van Buren St Unit 1711					M M 11	/	D 07			у 014	Y
	City	State	Zip Code			Trans	sact	ion ID	: 0E4E6	DFE5	2B74	2B1A389
	Chicago	IL	60607-3932		_	Amount	t of	Each I	Receipt	this F	'eriod	
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	Name of Employer	Occupation										
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
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s	UBTOTAL of Receipts This Page (optional)								1 40		30.	.00
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		× 11a		11b	11c		12	<u> </u>
Any information copied from such Reports								ng con		
or for commercial purposes, other than usir										
DuPage Medical Group LTE) PAC									
Full Name (Last, First, Middle Initial) A. Alicia Martin				Data	of P	eceipt				
Mailing Address 235 W Van Buren St			-					V = V	- V -	V
Unit 1711				11	VI	21) 14	T
City	State	Zip Code			sac					99C84D
Chicago	IL	60607-3932		Amou	nt o	f Each I	Receipt	this Pe	eriod	
FEC ID number of contributing federal political committee.	С					7			10.	00
Name of Employer	Occupation	1								
DuPage Medical Group, Ltd.	Physician									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		240.00								
Other (specify)		240.00								
Full Name (Last, First, Middle Initial) B. Nicholas Mataragas				Deta	of D	000:04				
Mailing Address 6105 Timber Ridge Ct						leceipt		V - W	¥ -	V
maning Address 6105 Himber Ridge Ct				10	vi .	24		_ 20'	14	T
City	State	Zip Code			sac					1889C5
Indian Head Park	IL	60525-3759				f Each I				
FEC ID number of contributing federal political committee.	С					7			19.	23
Name of Employer	Occupation	1								
DuPage Medical Group, Ltd.	Surgeon									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		461.52	1							
Other (specify)		, , , , , , , , , , , , , , , , , , , ,								
Full Name (Last, First, Middle Initial) C. Nicholas Mataragas	I			Date	of R	eceipt				
Mailing Address 6105 Timber Ridge Ct				M 11	VI	/ 07		Y Y 20	ү 14	Y
City	State	Zip Code		a second s	sac					BCB87FI
Indian Head Park	IL	60525-3759		Amou	nt o	f Each I	Receipt	this Pe	eriod	
FEC ID number of contributing federal political committee.	С					9			19.	23
Name of Employer	Occupation	1	\neg							
DuPage Medical Group, Ltd.	Surgeon									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		161 F2								
Other (specify)		461.52								
				_	-				40	40
SUBTOTAL of Receipts This Page (option	al)	·····				7	7		48.	40

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Use separate schedule(s) for each category of the

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	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC	
Full Name (Last, First, Middle Initial) A. Nicholas Mataragas Mailing Address 6105 Timber Ridge Ct City Indian Head Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60525-3759 C Occupation Surgeon Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 461.52	Date of Receipt
Full Name (Last, First, Middle Initial) B. Paul Merrick Mailing Address 540 Hill Ave City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60137-5032 C Occupation Physician Aggregate Year-to-Date ▼ 480.00 480.00	Date of Receipt
Full Name (Last, First, Middle Initial) C. Paul Merrick Mailing Address 540 Hill Ave City Glen Ellyn FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60137-5032 C Occupation Physician Aggregate Year-to-Date ▼ 480.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional).		► 59.23

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

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ITEMIZED REC	EIPTS

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TIEIMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	I rts and Statements may not be sold or used by any p using the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DuPage Medical Group L	.TD PAC	
Full Name (Last, First, Middle Initial) A. Paul Merrick		Date of Receipt
Mailing Address 540 Hill Ave		11 21 _ 2014
City	State Zip Code	Transaction ID : 0A49EE2A7146403DBDC
Glen Ellyn	IL 60137-5032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
DuPage Medical Group, Ltd.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		1
Other (specify)	480.00	
Full Name (Last, First, Middle Initial) B. M. Paul Meyer		Date of Receipt
Mailing Address 1801 S Highland Ave	9	10 24 _2014 _
City	State Zip Code	Transaction ID : D84AF59B11E24D1F9EA2
Lombard	IL 60148-4932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer	Occupation	
DuPage Medical Group, Ltd.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	936.00	
Full Name (Last, First, Middle Initial) C. M. Paul Meyer		Date of Receipt
Mailing Address 1801 S Highland Av	e	11 07 _2014
City	State Zip Code	Transaction ID : 422F0CE24A6F46DE99C8
Lombard	IL 60148-4932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer	Occupation	—
DuPage Medical Group, Ltd.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	936.00	1
SUBTOTAL of Receipts This Page (op	tional)	98.00

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

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TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTI	D PAC		
Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60148-4932 Year-to-Date ▼ 936.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60181-7144 Year-to-Date ▼ 936.00	Date of Receipt
Full Name (Last, First, Middle Initial) Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60181-7144 Year-to-Date ▼ 936.00	Date of Receipt
SUBTOTAL of Receipts This Page (option	nal)		117.00

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ITEMIZED REC	EIPTS

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TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	D PAC								
Full Name (Last, First, Middle Initial) A. Yoko Momoyama Mailing Address PO Box 7144 City Villa Park FEC ID number of contributing federal political committee.	State IL	Zip Code 60181-7144	Date of Receipt						
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)									
B. Hull Name (Last, First, Middle Initial) Mark Nelson Mailing Address 3753 King Williams Ct	B. Mark Nelson								
City Saint Charles FEC ID number of contributing federal political committee.	State IL	Zip Code 60174-7806	Transaction ID : C833B6E99FA44F8A86DE Amount of Each Receipt this Period 20.00						
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General	Occupation Physician Aggregate	Year-to-Date ▼							
Cother (specify) ▼ Full Name (Last, First, Middle Initial)									
Mailing Address 3753 King Williams Ct	Date of Receipt 11 07 2014 Transaction ID : 81BB3690E6614A448B07								
Saint Charles FEC ID number of contributing federal political committee.	C	60174-7806	Amount of Each Receipt this Period						
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) v	Occupation Physician Aggregate	Year-to-Date ▼ 480.00]						
SUBTOTAL of Receipts This Page (optio	nal)		79.00						

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ITEMIZED REC	EIPTS

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ITEMIZED RECE			for each category of the Detailed Summary Page		11a 13		11b 14	11c	12	17
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NAME OF COMMITT	EE (In Full) al Group LTD P	AC								
Full Name (Last, Firs A. Mark Nelson Mailing Address 3753 City Saint Charles FEC ID number of co federal political comm Name of Employer DuPage Medical Grou Receipt For: Primary Other (specify)	t, Middle Initial) B King Williams Ct Intributing hittee. p, Ltd.	State IL Occupation Physician	Zip Code 60174-7806 Year-to-Date ▼ 480.00			sac	21 tion ID		nis Perioc	1C69BC4
Full Name (Last, Firs B. Ravi Nemivant Mailing Address 561 City Wheaton FEC ID number of co federal political comm Name of Employer	Hevern Dr	State IL Occupation	Zip Code 60189-7396		Date of Receipt 10 24 2014 Transaction ID : EC7ACBAC853C46D0855 Amount of Each Receipt this Period 25.00					
DuPage Medical Grou Receipt For: Primary Other (specify)	General	Physician Aggregate	Year-to-Date ▼ 600.00]						
C. Ravi Nemivant Mailing Address 561 City Wheaton FEC ID number of co federal political comm Name of Employer DuPage Medical Grou Receipt For:	Hevern Dr Intributing hittee. Ip, Ltd.	State IL Occupation Physician Aggregate	Zip Code 60189-7396 Year-to-Date ▼ 600.00			sac	tion ID	7	nis Perioc	4332B047
SUBTOTAL of Receipts	This Page (optional)						7		70	.00

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and for commercial purposes, other than using th			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P.	AC							
Α.	Full Name (Last, First, Middle Initial) Ravi Nemivant Mailing Address 561 Hevern Dr City Wheaton FEC ID number of contributing federal political committee. Name of Employer	State IL Occupation	Zip Code 60189-7396	Date of Receipt					
	DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼								
В.	Full Name (Last, First, Middle Initial) Brian O'Leary Mailing Address 401 59th St	Date of Receipt							
	City Downers Grove	State IL	Zip Code 60516-1440	Transaction ID : F8FD42B9CDA8494B8579 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee. Name of Employer	Occupation		21.00					
	DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Physician Aggregate	Year-to-Date ▼ 504.00]					
С.	Full Name (Last, First, Middle Initial) Brian O'Leary			Date of Receipt					
	Mailing Address 401 59th St	11 07 2014 Transaction ID : 1723886E9A6E4D9181A8							
	Downers Grove FEC ID number of contributing federal political committee.	C	60516-1440	Amount of Each Receipt this Period					
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 504.00						
s	UBTOTAL of Receipts This Page (optional)		•••••	67.00					

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	EMIZED RECEIPTS	Detailed Summary Page]11b	11c		12	
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	y information copied from such Reports ar for commercial purposes, other than using										
	NAME OF COMMITTEE (In Full)	· · · · · · · ·				-	-				
	DuPage Medical Group LTD	PAC									
Α.	Full Name (Last, First, Middle Initial) Brian O'Leary				Date of	Re	eceipt				
	Mailing Address 401 59th St				M M	1	21	р / Y) 14	Y
	City	State IL	Zip Code								25B647
	Downers Grove	16	60516-1440		Amount	t of	Each F	Receipt t	his P	eriod	
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	Name of Employer	Occupation									
	DuPage Medical Group, Ltd.	Physician									
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в.	Full Name (Last, First, Middle Initial) James Oakley				Date of	Re	eceipt				
	Mailing Address 605 S Grant St				10	/	24) 14	Y
	City	State	Zip Code		Trans	acti	ion ID :	8DC3A	-C34	9DA4	AAA885
	Hinsdale	IL	60521-4453		Amount	t of	Each F	Receipt t	his P	eriod	
	FEC ID number of contributing federal political committee.	С					,			25.	00
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician/Ra	diologist								
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<u> </u>	Full Name (Last, First, Middle Initial) James Oakley				Date of	Re	eceipt				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	С												
A.	Full Name (Last, First, Middle Initial) James Oakley				[Date of	f Re	eceipt						
	Mailing Address 605 S Grant St					м м 11	/	21		/ Y	ү 20	14	Υ	
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B.	Full Name (Last, First, Middle Initial) Mathew Philip					Date of	f Re	ceipt						
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	Apt. 3					10		24	4	L	20	14		
	City	State	Zip Code			Trans	acti	on ID	: B61	10F60	FED	1847	51AB67	
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<u>с.</u>	Full Name (Last, First, Middle Initial) Mathew Philip					Date of	f Re							
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FEC Schedule A (Form 3X) Rev. 02/2003

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Use separate schedule(s) for each category of the

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	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	and Statements may not be sold or used by any ng the name and address of any political committ	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD) PAC	
Full Name (Last, First, Middle Initial) Mathew Philip Mailing Address 1608 W North Ave Apt. 3 City Chicago FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60622-2245 C Occupation Occupation Physician Aggregate Year-to-Date ▼ 936.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60187-3112 C Occupation Physician Aggregate Year-to-Date ▼ 504.00	Date of Receipt Date of Receipt Transaction ID : F8F8346D28214C0B8E8E Amount of Each Receipt this Period 21.00
Full Name (Last, First, Middle Initial) C. Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State Zip Code IL 60187-3112 C Occupation Physician Aggregate Year-to-Date ▼ 504.00	Date of Receipt 11 07 2014 Transaction ID : 7E154906A50642BB9815 Amount of Each Receipt this Period 21.00
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FEC Schedule A (Form 3X) Rev. 02/2003

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	D PAC		
Full Name (Last, First, Middle Initial) A. Stephen Pierson Mailing Address 1800 N Main St City Wheaton FEC ID number of contributing federal political committee.	State IL C	Zip Code 60187-3112	Date of Receipt 11 21 2014 Transaction ID : 398EA64E0FAC4FDF9CC7 Amount of Each Receipt this Period 21.00
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 504.00]
B. Full Name (Last, First, Middle Initial) John Porcelli Mailing Address 4530 Lee Ave			Date of Receipt
City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60515-2607 Year-to-Date ▼ 480.00	Transaction ID : AB14FF8779D4432A9C40 Amount of Each Receipt this Period 20.00
Full Name (Last, First, Middle Initial) John Porcelli Mailing Address 4530 Lee Ave City Downers Grove FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL Occupation Physician Aggregate	Zip Code 60515-2607 Year-to-Date ▼ 480.00	Date of Receipt Table of Receipt Table of Receipt Table of Receipt Transaction ID : 9EDEB15CE90944B2A85A Amount of Each Receipt this Period 20.00
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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NAME OF COMMITTEE (In Full) DuPage Medical Group LTD										
Full Name (Last, First, Middle Initial) John Porcelli Mailing Address 4530 Lee Ave City Downers Grove FEC ID number of contributing	State IL C	Zip Code 60515-2607			/ acti	21 ion ID :		C9CAI)14 E1446	7195A7
federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: □ Primary □ General Other (specify) ▼	Occupation Physician	Year-to-Date ▼ 480.00				7			20.1	
Full Name (Last, First, Middle Initial) Raghu Pulluru Mailing Address 3908 Littlestone Cir City Naperville	State	Zip Code 60564-5915			/ acti	24 on ID :		201 0 BB6	D8143	Y 4A85D1
FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	C Occupation Physician Aggregate	Year-to-Date ▼ 461.52				5			19.2	23
Full Name (Last, First, Middle Initial) Raghu Pulluru Mailing Address 3908 Littlestone Cir City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60564-5915 Year-to-Date ▼ 461.52			/ sacti	07 ion ID			14 2 1F48	AB8FC/
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X 11a 11b 12 14 13 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) **DuPage Medical Group LTD PAC** Full Name (Last, First, Middle Initial) Raghu Pulluru Α. Date of Receipt Mailing Address 3908 Littlestone Cir M M / 2014 11 21 City State Zip Code Transaction ID: 7E49A85282204C4F974B IL Naperville 60564-5915 Amount of Each Receipt this Period FEC ID number of contributing С 19.23 federal political committee. Name of Employer Occupation DuPage Medical Group, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 461.52 Other (specify) Full Name (Last, First, Middle Initial) B. Soujanya Pulluru Date of Receipt Mailing Address 3908 Littlestone Cir M M 10 24 2014 City State Zip Code Transaction ID : E7D87F16356F4292B148 IL Naperville 60564-5915 Amount of Each Receipt this Period FEC ID number of contributing С 23.08 federal political committee. Name of Employer Occupation DuPage Medical Group, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Primarv General 832.77 Other (specify) Full Name (Last, First, Middle Initial) **c.** Soujanya Pulluru Date of Receipt Mailing Address 3908 Littlestone Cir M = M / D 07 11 2014 City State Zip Code Transaction ID : 6E22546464764B24B17B IL Naperville 60564-5915 Amount of Each Receipt this Period FEC ID number of contributing С 23.08 federal political committee. Name of Employer Occupation Physician DuPage Medical Group, Ltd. Receipt For: Aggregate Year-to-Date ▼ Primary General 832.77 Other (specify) 65.39 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A	(FEC Form 3X)
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NAME OF COMMITTEE DuPage Medica		C										
Full Name (Last, First, A. Soujanya Pulluru Mailing Address 3908 L City		State	Zip Code 60564-5915			1 Insa	/	21 on ID :	: 59E38 1	2 1 F40 8		Y DBB68F
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Name of Employer DuPage Medical Group, Receipt For: Primary Other (specify) ▼	Ltd. General	Occupation Physician Aggregate	Year-to-Date ▼ 832.77]								
B. Full Name (Last, First, Kevin Regan Mailing Address 31808					Date	Μ	Rec	D			Y 1	Y
City Warrenville		State IL	Zip Code 60555-5923	_		nsa				7D1D		E538274
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DuPage Medical Group, Receipt For: Primary Other (specify)	Ltd. General	Physician Aggregate	Year-to-Date ▼ 807.66]								
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Mailing Address 31808	Village Green Ct				M 1		/	D 07			014	Y
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Full Name (Last, First, Middle Initial) A. Kevin Regan Mailing Address 31808 Village Green City Warrenville FEC ID number of contributing	Ct State IL C	Zip Code 60555-5923		M 11 Tran	sac		1 : B1F9C 9	his Period	1675ACB5
federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician	Year-to-Date ▼ 807.66]			7			
B. Full Name (Last, First, Middle Initial) Mailing Address 743 Godair Cir City Hinsdale	State	Zip Code		10 Trans	sac	2 tion ID	: 25F929		2F1BC14
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NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA											
Full Name (Last, First, Middle Initial) A. Steven Schmitz Mailing Address 743 Godair Cir City Hinsdale FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL Occupation Physician Aggregate	Zip Code 60521-8104		Date o	sact	2 ion ID	1 : 6D9	D9239		C6EA	<u>197</u> B
Full Name (Last, First, Middle Initial) Grant Sievertsen Mailing Address 1304 Midwest Club Pkwy City Oak Brook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60523-2519 Year-to-Date ▼ 461.52		Date o 10 Trans Amoun	sact	2 ion ID	4 : D92	7E95A			<u>}9E3</u>
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NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC		
Full Name (Last, First, Middle Initial) A. Grant Sievertsen Mailing Address 1304 Midwest Club Pkwy City Oak Brook FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60523-2519 Year-to-Date ▼ 461.52	Date of Receipt
Full Name (Last, First, Middle Initial) B. Lenora Su Mailing Address 1404 Chelsea Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL Occupation Physician Aggregate	Zip Code 60565-1612	Date of Receipt
Full Name (Last, First, Middle Initial) C. Lenora Su Mailing Address 1404 Chelsea Ln City Naperville FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate	Zip Code 60565-1612 Year-to-Date ▼ 936.00	Date of Receipt
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FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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City Naperville	State IL	Zip Code 60565-1612		Tran		tion ID):3		4483	32B4E	E9879A		
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Receipt For: Primary General Other (specify) ▼		/ear-to-Date ▼ 936.00]										
Full Name (Last, First, Middle Initial) B. Arnaldo Torres				Date o	of Re	eceipt							
Mailing Address 229 Wren Ct	01-11-	7. 0. 1.		^M 10	Л /	2	24	/ Y	20		Y		
City Bloomingdale	State IL	Zip Code 60108-1433									808C40		
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SCHEDULE A	(FEC	Form	3X)
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••	EMIZED RECEIPTS		Detailed Summary Page		-		11b	11c		12		
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or	for commercial purposes, other than using th	e name and a	address of any political committee	e to so	olicit co	ntrib	outions	from suc	h co	mmitt	ee.	
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P	AC										
<u>د</u>	Full Name (Last, First, Middle Initial) Arnaldo Torres				Date o	f Re	eceipt					
	Mailing Address 229 Wren Ct				M M	/	21			у 014	Y	
	City	State	Zip Code			sact					D5BAC0	
	Bloomingdale	IL	60108-1433		Amoun	t of	Each F	Receipt th	nis P	'eriod		
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	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11								
	Other (specify)		936.00	4								
B R	Full Name (Last, First, Middle Initial) Joseph Towers	1			Date o	f Re	ceint					
	Mailing Address 412 S Columbia St				10 ¹	_	24)14	Y	
	City	State	Zip Code			acti		64E13D			A78864	
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	Name of Employer	Occupation	1	_								
	DuPage Medical Group, Ltd.	Physician										
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<u>с.</u>	Full Name (Last, First, Middle Initial) Joseph Towers				Date o	f Re	eceipt					
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	Naperville	IL	60540-5418		Amoun	t of	Each F	Receipt th	nis P	eriod		
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	DuPage Medical Group, Ltd.	Physician										
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SCHEDULE A	(FEC	Form 3X)
ITEMIZED REC	EIPTS	•

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SCHEDULE A	(FEC Form 3X)
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SCHEDULE A	(FEC Form 3X)
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FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
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