

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

Office Use Only

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

Illinois Tenth Congressional District Democrats

ADDRESS (number and street)

1345 Forest

☐Check if different  
than previously  
reported. (ACC)

Highland Park

IL

60035

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00395889

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

11

04

2008

in the  
State of

IL

(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the  
State of☐

5. Covering Period

10

01

2008

through

10

15

2008

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

Type or Print Name of Treasurer

Dwayne Douglas

Signature of Treasurer

Electronically Filed by Dwayne Douglas

Date

10

23

2008

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Illinois Tenth Congressional District Democrats

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	5	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		19816.56
(b) Cash on Hand at Beginning of Reporting Period .....	8128.51	
(c) Total Receipts (from Line 19) .....	10230.45	78992.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	18358.96	98809.27
7. Total Disbursements (from Line 31) .....	7254.13	87704.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11104.83	11104.83
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Illinois Tenth Congressional District Democrats

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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	5440.00	47579.12
(i) Itemized (use Schedule A) .....	4210.45	29351.22
(ii) Unitemized .....	9650.45	76930.34
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	580.00	1400.00
(c) Other Political Committees (such as PACs) .....	10230.45	78330.34
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	35.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	428.52
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	198.85
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	10230.45	78992.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10230.45	78992.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	776.32	57405.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	776.32	57405.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2690.00
24. Independent Expenditure (use Schedule E) .....	6477.81	22608.72
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7254.13	87704.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7254.13	87704.44

**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) .....	10230.45	78330.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10230.45	78330.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	776.32	57405.72
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	428.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	776.32	56977.20

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

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

Joanne Armstrong

Mailing Address 942 County St.

City

Waukegan

State

IL

Zip Code

60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7980

Amount of Each Receipt this Period

250.00

contribution

**B.**

Full Name (Last, First, Middle Initial)

Vicki Bailyn

Mailing Address 953 Judson Ave.

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.7952

Amount of Each Receipt this Period

250.00

contribution

**C.**

Full Name (Last, First, Middle Initial)

Lyle Banks

Mailing Address 1124 Merrill

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lin Television

Occupation  
TV Broadcaster

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.7953

Amount of Each Receipt this Period

500.00

contribution

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

Prudence Beidler

Mailing Address 20 S. Stonegate Rd.

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
not employed

Occupation

not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.7951

Amount of Each Receipt this Period

1000.00

contribution

**B.**

Full Name (Last, First, Middle Initial)

Allen Bergman

Mailing Address 757 Sarah Ln.

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7973

Amount of Each Receipt this Period

250.00

contribution

**C.**

Full Name (Last, First, Middle Initial)

Nancie Blatt

Mailing Address 370 D Park Ave

City

Highland

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2005.32

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.7887

Amount of Each Receipt this Period

1000.00

contribution

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

Rochelle Distelheim

Mailing Address 2091 Hybernia Dr.

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7958

Amount of Each Receipt this Period

250.00

contribution

**B.**

Full Name (Last, First, Middle Initial)

Julie Hamos

Mailing Address 1640 Maple Ave.

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation

State Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.7883

Amount of Each Receipt this Period

250.00

contribution

**C.**

Full Name (Last, First, Middle Initial)

John Hmurovic

Mailing Address 208 Red Top Drive

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7967

Amount of Each Receipt this Period

250.00

contribution

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

750.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

Dianna Monie

Mailing Address 33024 N. Stone Manor Drive

City State Zip Code  
 Grayslake IL 60048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.7886

Amount of Each Receipt this Period

130.00

contribution

**B.**

Full Name (Last, First, Middle Initial)

Sheila Neilsen

Mailing Address 1075 Pelham

City State Zip Code  
 Winnetka IL 60093

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
career counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7875

Amount of Each Receipt this Period

250.00

contribution

**C.**

Full Name (Last, First, Middle Initial)

Stephen Ondra

Mailing Address 730 Linden Ave.

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northwestern University

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7961

Amount of Each Receipt this Period

250.00

contribution

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

630.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

A.

Full Name (Last, First, Middle Initial)

Dorothy Palombo

Mailing Address 626 Homewood Ave

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.7914

Amount of Each Receipt this Period

60.00

contribution

B.

Full Name (Last, First, Middle Initial)

Kathy Ryg

Mailing Address 307 Onwentsia

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation

State Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.7982

Amount of Each Receipt this Period

250.00

contribution

C.

Full Name (Last, First, Middle Initial)

Jean Solomon

Mailing Address 265 Roger Williams

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.7949

Amount of Each Receipt this Period

500.00

contribution

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

810.00

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

5440.00

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

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

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

Friends of Terry Link

Mailing Address Muir Ave

City

Lake Bluff

State

IL

Zip Code

60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

Transaction ID: SA11C.7976

Amount of Each Receipt this Period

500.00

contribution

**B.**

Full Name (Last, First, Middle Initial)

Vernon Township Democratic Organization

Mailing Address 449 Caren Dr

City

Buffalo Grove

State

IL

Zip Code

60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: SA11C.7921

Amount of Each Receipt this Period

80.00

contribution

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

580.00

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

580.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 21

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

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NAME OF COMMITTEE (In Full)

Illinois Tenth Congressional District Democrats

**A.**

Full Name (Last, First, Middle Initial)

First Bank of Highland Park

Mailing Address 1835 First St

City  
Highland Park

State  
IL

Zip Code  
60035

Purpose of Disbursement  
service fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.7987

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

170.87

**B.**

Full Name (Last, First, Middle Initial)

Jones House, Inc.

Mailing Address 740 Mellody Rd.

City  
Lake Forest

State  
IL

Zip Code  
60045

Purpose of Disbursement  
design and layout for postcards

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.8006

Date of Disbursement

10 / 12 / 2008

Amount of Each Disbursement this Period

600.00

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

770.87

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

770.87

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 13 / 21

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">321.50</div>	
City Libertyville <div style="float: right; text-align: right;"> State IL Zip Code 60048 </div>		<b>Transaction ID:</b> SE.7989 Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> Presidential	
Purpose of Expenditure printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">10356.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">160.75</div>	
City Libertyville <div style="float: right; text-align: right;"> State IL Zip Code 60048 </div>		<b>Transaction ID:</b> SE.7990 Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> Presidential	
Purpose of Expenditure printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate supported or Opposed by expenditure: Dan Seals		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">10516.88</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">482.25</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> 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.			
Dwayne Douglas Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 3</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">160.75</div>	
City Libertyville		<b>Transaction ID:</b> SE.7992	
State IL		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure printing		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Category/ Type		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3197.88</div>	
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">550.93</div>	
City Libertyville		<b>Transaction ID:</b> SE.7997	
State IL		Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> Presidential	
Purpose of Expenditure printing		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Category/ Type		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">13212.14</div>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">711.68</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Dwayne Douglas Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">275.47</div>	
City Libertyville		<b>Transaction ID:</b> SE.7998	
State IL		Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> Presidential	
Zip Code 60048		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure printing		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/ Type		2008	
Name of Federal Candidate supported or Opposed by expenditure: Dan Seals			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">13487.61</div>	
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 12</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">275.47</div>	
City Libertyville		<b>Transaction ID:</b> SE.7999	
State IL		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Zip Code 60048		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure printing		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Category/ Type		2008	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">4188.13</div>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">550.94</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Dwayne Douglas Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 23</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 8</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">321.50</div>	
City State Zip Code Libertyville IL 60048		<b>Transaction ID:</b> SE.8003	
Purpose of Expenditure printing		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14732.23</div>	
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 8</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">160.75</div>	
City State Zip Code Libertyville IL 60048		<b>Transaction ID:</b> SE.8004	
Purpose of Expenditure printing		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dan Seals		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14892.98</div>	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">482.25</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) <b>TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<p>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.</p>			
Dwayne Douglas Signature		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8</div> </div>	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Performance Mailing & Printing		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address 777 N Milwaukee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">160.75</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Libertyville</div> <div>State IL</div> <div>Zip Code 60048</div> </div>		<b>Transaction ID:</b> SE.8005 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Purpose of Expenditure printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4656.59</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address Osterman Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1429.55</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Deerfield</div> <div>State IL</div> <div>Zip Code 60015</div> </div>		<b>Transaction ID:</b> SE.7994 Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> Presidential	
Purpose of Expenditure postage		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">11946.43</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1590.30</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> 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.			
Dwayne Douglas _____ Signature		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 3</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00395889</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address Osterman Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">714.78</div>	
City: Deerfield      State: IL      Zip Code: 60015		<b>Transaction ID:</b> SE.7995	
Purpose of Expenditure postage		Office Sought: <input checked="" type="checkbox"/> House      State: IL <input type="checkbox"/> Senate      District: 10 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dan Seals		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">12661.21</div>	

  

Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 1 2</div> <div><small>Y Y Y Y</small> 2 0 0 8</div> </div>	
Mailing Address Osterman Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">714.78</div>	
City: Deerfield      State: IL      Zip Code: 60015		<b>Transaction ID:</b> SE.7996	
Purpose of Expenditure postage		Office Sought: <input type="checkbox"/> House      State: _____ <input type="checkbox"/> Senate      District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3912.66</div>	

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1429.56</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

Dwayne Douglas

Signature

Date

M M  
1 0

D D  
2 3

Y Y Y Y  
2 0 0 8

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00395889	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 8	
Mailing Address Osterman Dr		Amount 615.41	
City State Zip Code Deerfield IL 60015		<b>Transaction ID:</b> SE.8000	
Purpose of Expenditure postage		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: MARK STEVEN KIRK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 14103.02		2008	
Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 8	
Mailing Address Osterman Dr		Amount 307.71	
City State Zip Code Deerfield IL 60015		<b>Transaction ID:</b> SE.8001	
Purpose of Expenditure postage		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> Presidential	
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Dan Seals		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 14410.73		2008	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		923.12	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> 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.			
Dwayne Douglas Signature		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Illinois Tenth Congressional District Democrats		FEC IDENTIFICATION NUMBER <b>C</b> C00395889	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee US Postal Service		Date M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 8	
Mailing Address Osterman Dr		Amount 307.71	
City Deerfield		Transaction ID: SE.8002	
State IL		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Zip Code 60015		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Purpose of Expenditure postage		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Category/ Type 001			
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama			
Calendar Year-To-Date Per Election for Office Sought		4495.84	

(a) SUBTOTAL of Itemized Independent Expenditures .....	307.71
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	6477.81

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.

Dwayne Douglas  
Signature

Date M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Form/Schedule: **F3XN**

Transaction ID:

With respect to administrative expenses, be advised that we do not have a fixed office, so we do not pay rent or utilities expenses. We meet in living rooms, libraries, and many other locations across Illinois's Tenth Congressional District. We do not have salaried or contract employees. No administrative expenses are paid by a connected organization. There are no expenses incurred but not paid in the reporting period.

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