Image# 28931877863 06/09/2008 10:18

	RECEIPTS AND DISBUF		NE DDECIDENT OD	1 / 45
1. NAME OF COMMITT		FOR THE OFFICE C	PRESIDENT OR	VICE-PRESIDENT
COX 2008 COMMIT	ITEE INC			
ADDRESS (number and	d street) Check if different than pr	eviously reported		
Post Office Box 535	·	onedally reported	2. IDENTIFICATION NU	JMBER
OITY CTATE and 710	0005		C00420224	ND -
CITY, STATE, and ZIP ( Buffalo Grove		089	3. IS THIS REPORT FO	OH: General
4. TYPE OF RI	<b>EPORT</b> (Check here if this is a Te	rmination Report.)		
		Monthly Report Due	On:	
April 15 Quarterly Re		February 20	June 20	October 20
July 15 Quarterly Rep	port	March 20 X April 20	☐ July 20 ☐ August 20	November 20 December 20
October 15 Quarterly	Report	May 20	September 20	<b>=</b>
January 31 Year End	I Report	Twelfth day report pr		
		election on	•	ype of Election) e State of
		Thirtieth day report for	ollowing the General Electi	
		Thirtieth day report to	blowing the General Liecti	OII OII
		on		
IS THIS REPORT AN AI	MENDMENT X YES NO			
5. COVERING PERIOD		FROM 03/01/2008	THRO	DUGH 03/31/2008
SUMMARY	6. CASH ON HAND AT BEGINNING OF T REPORTING PERIOD	HE		2402.64
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)			11.10
	8. SUBTOTAL (Lines 6 and 7)			2413.74
	9. TOTAL DISBURSEMENTS THIS PERIO (From Line 30, Column A, Page 2)	DD .		1129.12
	10. CASH ON HAND AT CLOSE OF REPO (Subtract Line 9 from 8)	ORTING PERIOD		1284.62
	11. DEBTS AND OBLIGATIONS OWED TO (Itemize All on Schedule C-P or Schedule			0.00
	12. DEBTS AND OBLIGATIONS OWE <u>D B</u> (Itemize All on Schedule C-P or Schedule			1055000.00
	13. EXPENDITURES SUBJECT TO LIMITA	ATION		-64924805.38
NET ELECTION CYCLE- TO-DATE	14. NET CONTRIBUTIONS (Other than Lo. (Subtract Line 28d, Column B from 17e,	ans) Column B, Page 2)		22167.51
EXPENDITURES	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Colummn B from 23,	Column B, Page 2)		1051591.36
I certify that I have exa	mined this Report and to the best of my kr	nowledge and belief it is tr	rue, correct, and comple	te.
Type or Print Name of Tre Claremont Ruf				Date 06/09/2008
Signature of Treasurer				
	lse, erroneous, or incomplete information may	, ,	his Report to the penalties	of 2 U.S.C. §437g.
All previous versions of F  For further information	EC FORM 3P are obsolete and should no long contact:  Federal Election Commission			
i or iurther information	999 E Street, N.W. Washington, DC 20463	Toll Free 800-424- Local 202-694-110	<sup>-9530</sup>	FEC FORM 3P 01/2001)

(PAGE 2, FEC FORM 3P) Name of committee (in full)	RSEMENTS 2 / 45  Report Covering the Period							
COX 2008 COMMITTEE INC	From: 03/01/2008 To: 03/31/2008							
		COLUMN A	COLUMN B					
I. RECEIPTS		Total This Period	Election Cycle-to-Date					
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	0.00					
17. CONTRIBUTIONS (other than loans) FROM:								
(a) Individuals/Persons Other Than Political Committees		11.10	22167.51					
(b) Political Party Committees		0.00	0.00					
(c) Other Political Committees		0.00	0.00					
(d) The Candidate		0.00	0.00					
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17	'(c), 17(d))	11.10	22167.51					
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	0.00					
19. LOANS RECEIVED:								
(a) Loans Received From or Guaranteed by Candidate		0.00	1055000.00					
(b) Other Loans		0.00	0.00					
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	1055000.00					
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :								
(a) Operating		0.00	5357.30					
(b) Fundraising		0.00	0.00					
(c) Legal and Accounting		0.00	0.00					
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a),	20(b) and 20(c))	0.00	5357.30					
21. OTHER RECEIPTS (Dividend, Interest, etc.)		0.00	500.00					
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		11.10	1083024.81					
II. DISBURSEMENTS								
23. OPERATING EXPENDITURES		1129.12	1056948.66					
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00					
25. FUNDRAISING DISBURSEMENTS		0.00	23603.26					
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	0.00					
27. LOAN REPAYMENTS MADE :								
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	0.00					
(b) Other Repayments		0.00	0.00					
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		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		0.00	0.00					
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		0.00	0.00					
29. OTHER DISBURSEMENTS		0.00	0.00					
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		1129.12	1080551.92					
III. CONTRIBUTED ITEMS (Stock, Art (	Objects, etc.)							
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)		0.00						

nagem 2000 to 11000			
	mary Committe		TE FOR A PRESIDENTIAL CANDIDATE 3 / 45 to Receive Federal Funds)
1. NAME OF COMMITT	ΓΕΕ (in full)		
COX 2008 COMMI	TTEE INC		
ADDRESS (number an	d street)		
Post Office Box 5353			
CITY, STATE, and ZIP	CODE		2. IDENTIFICATION NUMBER
Buffalo Grove	IL	60089	C00420224

## **ALLOCATION BY STATE**

STATE ALLOCATION TOTAL THIS PERIOD ALLOCATION TO DATE		STATE	ALLOCATION THIS PERIOD				
Alabama	0.00	0.00	Nebraska	0.00	0.00		
Alaska	0.00	0.00	Nevada	0.00	0.00		
Arizona	0.00	1000.00	New Hampshire	0.00	44271.05		
Arkansas	0.00	0.00	New Jersey	0.00	0.00		
California	0.00	12.60	New Mexico	0.00	0.00		
Colorado	0.00	0.00	New York	0.00	12.60		
Connecticut	0.00	0.00	North Carolina	0.00	0.00		
Delaware	0.00	12.60	North Dakota	0.00	0.00		
District of Columbia	0.00	1095.59	Ohio	0.00	0.00		
Florida	0.00	12.60	Oklahoma	0.00	0.00		
Georgia	0.00	0.00	Oregon	0.00	0.00		
Hawaii	i 0.00 0.00 0.00 40.00		Pennsylvania	0.00	0.00		
Idaho			Rhode Island	0.00	0.00		
Illinois	0.00	2969.72	South Carolina	0.00	104362.90		
Indiana	0.00	0.00	South Dakota	0.00	0.00		
lowa	0.00	101182.84	Tennessee	0.00	0.00		
Kansas	0.00	0.00	Texas 0.00		0.00		
Kentucky	0.00	0.00	Utah	0.00	0.00		
Louisiana	0.00	0.00	Vermont	0.00	0.00		
Maine	0.00	0.00	Virginia	0.00	0.00		
Maryland	0.00	1012.60	Washington	0.00	0.00		
Massachussetts	0.00	0.00	West Virginia	0.00	100.00		
Michigan	0.00	0.00	Wisconsin	0.00	0.00		
Minnesota	0.00	0.00	Wyoming	0.00	0.00		
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00		
Missouri	0.00	0.00	Guam	0.00	0.00		
Montana	0.00	0.00	Virgin Islands	0.00	0.00		
			TOTALS	0.00	256085.10		

Schedule A-P			Lla a apparata ashadula(a)	FOR LINE NUMBER: PAGE 4 / 45						
	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one) 16 x 17a 17b 17c 17d 18						
_		Detailed Summary Page								
	Any information copied from such Reports and Stor for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full)									
	COX 2008 COMMITTEE INC									
Α.	Full Name (Last, First, Middle Initial) George Nelson			Date of Receipt						
	Mailing Address 5383 Apache Trail			03 / 05 / 4 2008						
	City	State	Zip Code							
	<u>Harrison</u>	MI	48265	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			11.10						
	Name of Employer Vietnam Veteran	Occupation Disabled	n Vietnam Veteran	Donation						
	Receipt For: 2008	Election C	Cycle-to-Date ▼							
	X Primary General Other (specify) ▼	0 0	11.10	, in 0.4474.7405						
				Transaction ID: SA17A 7185						

SUBTOTAL of Receipts This Page (optional)	•	11.10
TOTAL This Period (last page this line number only)	<u> </u>	11.10

# Schedule B-P

FOR LINE NUMBER: PAGE 5/45

			Use separate schedule(s)						ly one)							
ITEMIZED DISBURSEMENTS		TS	for each category of the Detailed Summary Page			Γχ.	23	П	7 24				26 F	7 27a		
				Detailed	Summary Fage		Ĥ	27b	H	28a	Н	28b	ш	28c	29	
		ed from such Reports rposes, other than usi														
$\setminus$	NAME OF COM	MITTEE (In Full)														
	COX 2008 CO	MMITTEE INC														
	•	First, Middle Initial)										-		23.71	87	
	Cardmember S	Services										isburs				
	Mailing Address	Post Office Box	(15298							0 <sup>M</sup> 3	М	/ D 1	<sup>D</sup> 2	Y	Ž 0 Ŏ 8 Š	
	City Wilmington			tate DE	Zip Code 19850					Amou	nt o	f Each	Disb		nt this Per	riod
	Purpose of Disbu Cellular phone se						10	1		<u></u>	_	_			350.00	
	Candidate Name COX 2008 CO					С	ateg Typ	jory/ e								
	Office Sought: State:	House Senate X President District: 02		Primary	General pecify) ▼											
	Full Name (Last,	First, Middle Initial)	•							Trans	acti	ion ID:	SE	323.71	90	
•	Carl Segvich											isburs				
	Mailing Address	3110 South We	ells							0 <sup>M</sup> 3	М	/ D	<b>4</b>	Υ	ž 0 0 8 °	
	City Chicago		S II	tate L	Zip Code 60616					Amou	nt o	f Each	Disb		nt this Per	riod
	Purpose of Disbu Salary	irsement					10	1		L.	-				725.00	
	Candidate Name COX 2008 CO	MMITTEE INC				O	ateg Typ	jory/ e								
	Office Sought:	House Senate X President		Primary	General pecify) ▼											
	State:	District: 02		(*	<i>&gt;,</i> ₹											

<b>•</b>	1075.00
<u> </u>	1075.00
-	<u> </u>

FE1AN060.PDF

#### Schedule C-P PAGE 6 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4100 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 02 03 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 7 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4101 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 03 0 6 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 8 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4429 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 0 4 2006 12/31/2008 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 10000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 9 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4432 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0.5 0 4 2006 12/31/2008 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 10 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4433 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 0 0 5 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 11/45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4434 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 5 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 12/45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4435 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 06 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 13 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4457 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D D 0 7 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 10000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 14 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4456 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 28 0 7 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 15/45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4458 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D D 8 0 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 16 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4459 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 28 8 0 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 17/45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4460 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 3 0 9 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 18 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4461 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 0.00 30000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 0 9 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 30000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 19/45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4462 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 28 0 9 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### Schedule C-P PAGE 20 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4782 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 21 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4783 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 0 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

### Schedule C-P PAGE 22 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4784 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 8 0 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 23 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4785 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred о 3 0 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 10000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 24 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4786 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 6 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 25 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.4787 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 2006 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 26 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5197 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 1 0 9 2007 12/31/2008 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 27 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5198 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 40000.00 0.00 40000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 6 0 1 2007 12/31/2008 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 40000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 28 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5199 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 0 29 0 1 2007 12/31/2008 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 29 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5200 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 02 0 6 2007 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### Schedule C-P PAGE 30 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5201 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 0.00 30000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 02 2007 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 30000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### Schedule C-P PAGE 31 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5202 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 03 2007 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 32 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5203 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D D 03 2007 12/31/08 5.10 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 33 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5574 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 4 0 4 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 34 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5575 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 15000.00 0.00 15000.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 1 5 0 4 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 15000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 35 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5576 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 50000.00 0.00 50000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0.5 0 2 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 50000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 36 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5577 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 6 0 5 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 37 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5578 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 3 06 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 38 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5579 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 1 4 06 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 39 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.5580 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred о 3 0 06 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 40 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.6136 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 0.00 30000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 7 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 30000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 41 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.6137 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 8 0 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ...... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 42 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.6138 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 0.00 25000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 9 0 5 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 25000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only)

#### Schedule C-P PAGE 43 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.6139 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 0 9 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 10000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only)

### Schedule C-P PAGE 44 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.7036 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 2 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 20000.00 SUBTOTALS This Period This Page (optional) ..... .00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

#### Schedule C-P PAGE 45 / 45 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 19a **Detailed Summary Page** 19b NAME OF COMMITTEE (In Full) COX 2008 COMMITTEE INC Transaction ID: SC/12.7037 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: John H. Cox - [PERSONAL FUNDS] X Primary General Mailing Address Other (specify) 55 East Erie City Chicago State IL ZIP Code 60611 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 03 2007 12/31/08 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 10000.00 SUBTOTALS This Period This Page (optional) ..... 1055000.00 TOTALS This Period (last page in this line only)