

**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

PROGRESSIVE CHOICES PAC

ADDRESS (number and street)
▼

P.O. BOX 58

☐Check if different
than previously
reported. (ACC)

EVANSTON

IL

60204

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00381806

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

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

06

01

2007

through

06

30

2007

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

Karen Lennon

Signature of Treasurer

Electronically Filed by Karen Lennon

Date

08

16

2007

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. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PROGRESSIVE CHOICES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		4402.48
(b) Cash on Hand at Beginning of Reporting Period	4009.96	
(c) Total Receipts (from Line 19)	48054.00	48054.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	52063.96	52456.48
7. Total Disbursements (from Line 31)	7953.58	8346.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44110.38	44110.38
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	36604.00	36604.00
(ii) Unitemized	450.00	450.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	37054.00	37054.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	11000.00	11000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	48054.00	48054.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	48054.00	48054.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48054.00	48054.00

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)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		953.58	1346.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		953.58	1346.10
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		7000.00	7000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
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))..		7953.58	8346.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		7953.58	8346.10

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)	48054.00	48054.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48054.00	48054.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	953.58	1346.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	953.58	1346.10

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 19

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. Susan Berghoef

Mailing Address 2501 Kenilworth Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.4154

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Steve Bernstein

Mailing Address 513 Chicago Ave

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.4170

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Harvey Echols

Mailing Address 2757 Ridge Ave.

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Doctor, Occupational & Sports Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.4172

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial) Elaine Fox Mailing Address 4452 W. Devon Avenue City Lincolnwood State IL Zip Code 60712 FEC ID number of contributing federal political committee. C Name of Employer Seyfarth Shaw Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 20 / 2007 Transaction ID: SA11A1.4156 Amount of Each Receipt this Period 1000.00
B. Full Name (Last, First, Middle Initial) Harriet Jacobs Mailing Address 8101 N. Keeler Ave. City Skokie State IL Zip Code 60076 FEC ID number of contributing federal political committee. C Name of Employer Michael Silver and Company Occupation Accountant-CPA, Tax Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA11A1.4152 Amount of Each Receipt this Period 300.00
C. Full Name (Last, First, Middle Initial) Fay Levin Mailing Address 240 Locust Road City Winnetka State IL Zip Code 60093 FEC ID number of contributing federal political committee. C Name of Employer Res Publica Group Occupation Senior Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 25 / 2007 Transaction ID: SA11A1.4176 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional) ▶		2300.00
TOTAL This Period (last page this line number only) ▶		

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

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

FOR LINE NUMBER: PAGE 8 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)

Jack Marco

Mailing Address 2426 Lincolnwood

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.4231

Amount of Each Receipt this Period

454.00

In-kind - Catering

B. Full Name (Last, First, Middle Initial)

Harle Montgomery

Mailing Address 2150 N. Lincoln Park West #406

City State Zip Code
 Chicago IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.4164

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)

Abbey Romanek

Mailing Address 1716 Washington

City State Zip Code
 Wilmette IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.4166

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5704.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 19

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)

Sarah Schmidt

Mailing Address 2528 Marcy Avenue

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sarah Schmidt Consulting

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.4162

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)

Penny Sebring

Mailing Address 2735 Sheridan Road

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Chicago

Occupation
Director & Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.4160

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)

David Sensibar

Mailing Address 5737 S. Blackstone Ave.

City State Zip Code
 Chicago IL 60637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Constructure Aggregates
Corporation

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.4148

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial) Leo Smith		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 5348 N. Lakewood		Transaction ID: SA11A1.4184
City Chicago	State IL	Zip Code 60640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer IL Birth to Five PAC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Heather Steans		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 5348 N. Lakewood Ave.		Transaction ID: SA11A1.4182
City Chicago	State IL	Zip Code 60640
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self-employed	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Ellen Stone-Belic		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 418 W. Webster		Transaction ID: SA11A1.4146
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Columbia	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial) Mary Stowell Mailing Address 301 Woodley Road City Winnetka State IL Zip Code 60693 FEC ID number of contributing federal political committee. C Name of Employer Stowell and Freidman Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt MM / DD / YYYY 06 / 27 / 2007 Transaction ID: SA11A1.4180 Amount of Each Receipt this Period 1500.00
B. Full Name (Last, First, Middle Initial) Jeanne Sullivan Mailing Address 175 E. Delaware Pl. City Chicago State IL Zip Code 60611 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt MM / DD / YYYY 06 / 25 / 2007 Transaction ID: SA11A1.4174 Amount of Each Receipt this Period 5000.00
C. Full Name (Last, First, Middle Initial) Mark Tendam Mailing Address 2448 Lincolnwood Dr. City Evanston State IL Zip Code 60201 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Graphic Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt MM / DD / YYYY 06 / 20 / 2007 Transaction ID: SA11A1.4158 Amount of Each Receipt this Period 300.00
SUBTOTAL of Receipts This Page (optional) ▶			6800.00
TOTAL This Period (last page this line number only) ▶			36604.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. American Association for Justice PAC

Mailing Address 1050 31st Street, NW

City State Zip Code
 Washington DC 20007

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11C.4190

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. American College of Radiology Association PAC

Mailing Address 1701 Pennsylvania Avenue NW, #610

City State Zip Code
 Washington DC 20006

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11C.4194

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. American Hospital Association PAC

Mailing Address 325 Seventh Street, NW

City State Zip Code
 Washington DC 20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 0 7

Transaction ID: SA11C.4192

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 13 / 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial) Humane USA PAC Mailing Address P.O. Box 19224 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11C.4188 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	0		2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		2	0		2	0	0	7																							
1000.00																																
B. Full Name (Last, First, Middle Initial) Intl. Brotherhood of Electrical Workers COPE Mailing Address 1125 15th St., NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11C.4198 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	0	7	2500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		2	8		2	0	0	7																							
2500.00																																
C. Full Name (Last, First, Middle Initial) United Auto Workers V-CAP Mailing Address 8000 East Jefferson Avenue City Detroit State MI Zip Code 48214 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11C.4186 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	0		2	0	0	7	2500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	6		2	0		2	0	0	7																							
2500.00																																

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 19

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)

United Transportation Union PAC

Mailing Address 14600 Detroit Avenue

City State Zip Code
 Cleveland OH 44107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 7

Transaction ID: SA11C.4200

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)

Ven-PAC

Mailing Address P.O. Box 83142

City State Zip Code
 Gaithersburg MD 20883

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11C.4196

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

11000.00

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 15 / 19

<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)
PROGRESSIVE CHOICES PAC

A. AT&T Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 27-866 City Kansas City State MO Zip Code 64184 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.4115 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 49.15
B. Chase Bank Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 15153 City Wilmington State DE Zip Code 19886 Purpose of Disbursement Itemization Attached Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.4116 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 450.43
C. U.S. Postal Service Full Name (Last, First, Middle Initial) Mailing Address 1101 Davis City Evanston State IL Zip Code 60201 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.4116.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 333.29 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

499.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 19

<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)

PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. Jack Marco

Mailing Address 2426 Lincolnwood

City
Evanston

State
IL

Zip Code
60201

Purpose of Disbursement
In-kind - Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4232

Date of Disbursement

/ /

Amount of Each Disbursement this Period

454.00

SUBTOTAL of Disbursements This Page (optional)

454.00

TOTAL This Period (last page this line number only)

953.58

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 17 / 19

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. BOCCIERI FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address PO BOX 3016 City ALLIANCE State OH Zip Code 44601 Purpose of Disbursement Contribution <input type="text"/> Candidate Name JOHN A BOCCIERI Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 16		Transaction ID: SB23.4128 Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2007 Amount of Each Disbursement this Period <input type="text"/> 1000.00
B. DRIEHAUS FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 1018 BENZ AVENUE City CINCINNATI State OH Zip Code 45238 Purpose of Disbursement Contribution <input type="text"/> Candidate Name STEVEN LEO DRIEHAUS Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 01		Transaction ID: SB23.4131 Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2007 Amount of Each Disbursement this Period <input type="text"/> 1000.00
C. FRIENDS OF DAN MAFFEI Full Name (Last, First, Middle Initial) Mailing Address PO Box 74 City Syracuse State NY Zip Code 13214 Purpose of Disbursement Contribution <input type="text"/> Candidate Name DANIEL B MAFFEI Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 25		Transaction ID: SB23.4137 Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2007 Amount of Each Disbursement this Period <input type="text"/> 1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 19

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF PHIL HARE

Mailing Address 313 17th Street
P.O. Box 4183

City Rock Island State IL Zip Code 61202

Purpose of Disbursement
Contribution

Candidate Name
PHILIP G HARE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: IL District: 17

Transaction ID: SB23.4140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KAY FOR CONGRESS

Mailing Address PO BOX 14194

City PARKVILLE State MO Zip Code 64152

Purpose of Disbursement
Contribution

Candidate Name
KAY BARNES

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: MO District: 06

Transaction ID: SB23.4125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KISSELL FOR CONGRESS

Mailing Address PO BOX 1530

City BISCOE State NC Zip Code 27209

Purpose of Disbursement
Contribution

Candidate Name
LARRY W KISSELL

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: NC District: 08

Transaction ID: SB23.4134

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 19

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

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NAME OF COMMITTEE (In Full)

PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. LOEBSACK FOR CONGRESS

Mailing Address PO Box 1457

City
Iowa City

State
IA

Zip Code
52244

Purpose of Disbursement
Contribution

Candidate Name
DAVID WAYNE LOEBSACK

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: IA District: 02

Transaction ID: SB23.4122

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

7000.00