

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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
Atkinson for Congress

ADDRESS (number and street) PO Box 97
 Check if different than previously reported. (ACC)
Willow Springs IL 60480

2. **FEC IDENTIFICATION NUMBER** C00493247
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
IL 03

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 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 04 01 2011 through 06 30 2011

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 Mr John Maloney

Signature of Treasurer Electronically Filed by Mr John Maloney Date 07 15 2011

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

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Atkinson for Congress

Report Covering the Period:

From:

M M
0 4D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 6D D
3 0Y Y Y Y
2 0 1 1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	24762.15	280760.94
(b) Total Contribution Refunds (from Line 20(d)).....	172281.17	172281.17
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-147519.02	108479.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	90583.83	136503.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	90583.83	136503.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	233979.68	
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).....	270000.00	

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 3 (Revised 12/2003)

Write or Type Committee Name
Atkinson for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	16950.00	239776.76
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	16950.00	239776.76
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	7812.15	8384.18
(c) Other Political Committees (such as PACS).....	0.00	32600.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	24762.15	280760.94
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	270000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	270000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	2.88	3.26
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	24765.03	550764.20

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	90583.83	136503.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	166281.17	166281.17
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	172281.17	172281.17
21. OTHER DISBURSEMENTS.....	8000.00	8000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	270865.00	316784.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	480079.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	24765.03
25. SUBTOTAL (add Line 23 and Line 24).....	504844.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	270865.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	233979.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Deborah Andrzejewski		Date of Receipt
	Mailing Address 3 Seneca Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 05 / 09 / 2011
	City	State	Zip Code
	Burr Ridge	IL	60527-0815
	FEC ID number of contributing federal political committee. C		Transaction ID: C6417194
Name of Employer N/A		Occupation Various volunteer positions	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 0.00	

B.	Full Name (Last, First, Middle Initial) Gloria A Atkinson		Date of Receipt
	Mailing Address 310 S. Main		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 05 / 15 / 2011
	City	State	Zip Code
	Lombard	IL	60148
	FEC ID number of contributing federal political committee. C		Transaction ID: C6495048
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 100.00	

C.	Full Name (Last, First, Middle Initial) John M Atkinson		Date of Receipt
	Mailing Address 1169 N. Persimmon Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 05 / 15 / 2011
	City	State	Zip Code
	Vincennes	IN	47591
	FEC ID number of contributing federal political committee. C		Transaction ID: C6495054
Name of Employer Ribett High School		Occupation Teacher	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 100.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Mary Ann Atkinson		Date of Receipt
	Mailing Address 660 Yardley Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 15 / 2011
	City	State	Zip Code
	Hoffman Estates	IL	60169
	FEC ID number of contributing federal political committee. C		Transaction ID: C6495001
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) William C Atkinson		Date of Receipt
	Mailing Address 5844 Walnut Ave Apt 1A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 15 / 2011
	City	State	Zip Code
	Downers Grove	IL	60516
	FEC ID number of contributing federal political committee. C		Transaction ID: C6494976
Name of Employer Citizens Bank		Occupation Personal Banker	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Patricia Atkinson-Cepeda		Date of Receipt
	Mailing Address 235 W Parkside Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 15 / 2011
	City	State	Zip Code
	Lombard	IL	60148
	FEC ID number of contributing federal political committee. C		Transaction ID: C6494961
Name of Employer Good Faith Effort		Occupation Teacher	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 1656 W 101st Street

City State Zip Code
Chicago IL 60643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Good Faith Effort Good Faith Effort

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 1 1

Transaction ID: C6363571

Amount of Each Receipt this Period
100.00

Election Cycle-to-Date: 0.00

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

Mailing Address 912 10th Ave

City State Zip Code
San Mateo CA 94402-1807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
sfusd teacher

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: C6344812

Amount of Each Receipt this Period
10.00

Election Cycle-to-Date: 10.00

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

Mailing Address 2960 15th Ave

City State Zip Code
Moline IL 61265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HRH President - CPCU, ARM

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 1 1

Transaction ID: C6418814

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date: 250.00

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 8 Seneca Ct

City State Zip Code
Burr Ridge IL 60527

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Good Faith Effort Nurse

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 1 1

Transaction ID: C6495010

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mary Lynn Cali

Mailing Address 410 Persimmon Dr

City State Zip Code
St. Charles IL 60174

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 1 1

Transaction ID: C6495088

Amount of Each Receipt this Period
250.00

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

Mailing Address 21754 Florin Ct

City State Zip Code
Frankfort IL 60423-2259

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mainline Information Systems Business Continuity Specialist

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: C6351305

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) 550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
Janice M Cowhey
Mailing Address 9100 Frances Lane
City State Zip Code
Orland Park IL 60462
FEC ID number of contributing federal political committee. **C**
Name of Employer Tree Town Reproductions Occupation Administrator
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00
Date of Receipt MM / DD / YYYY
05 / 15 / 2011
Transaction ID: C6495039
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Leonard Cudzilo
Mailing Address 19W204 Old Tavern Rd E
City State Zip Code
Oak Brook IL 60523-1046
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Consultant/writer
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00
Date of Receipt MM / DD / YYYY
04 / 26 / 2011
Transaction ID: C6348027
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mary Lynn Curran
Mailing Address 3550 N Lake Shore Dr Apt 1801
City State Zip Code
Chicago IL 60657-7835
FEC ID number of contributing federal political committee. **C**
Name of Employer Willis Group Occupation Consultant
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt MM / DD / YYYY
05 / 15 / 2011
Transaction ID: C6494944
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
Melissa P Damewood
 Mailing Address 427 Alexander Blvd
 City Elmhurst State IL Zip Code 60126
 Date of Receipt 05 / 11 / 2011
Transaction ID: C6418842
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Good Faith Effort Occupation Good Faith Effort
 Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 100.00

B. Full Name (Last, First, Middle Initial)
William Doyle
 Mailing Address 251 White Oak Lane
 City Winnetka State IL Zip Code 60093
 Date of Receipt 05 / 02 / 2011
Transaction ID: C6363580
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Winston & Strawn Occupation Attorney
 Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
Sebastian Ellefson
 Mailing Address 1630 W Lunt Ave Apt 3A
 City Chicago State IL Zip Code 60626-2757
 Date of Receipt 04 / 02 / 2011
Transaction ID: C6288885
 Amount of Each Receipt this Period 10.00
 FEC ID number of contributing federal political committee. C
 Name of Employer City of Chicago Occupation Law Clerk
 Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 10.00

SUBTOTAL of Receipts This Page (optional) ► 610.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 11 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 909 N 7th Ave # 1

City Tucson State AZ Zip Code 85705-7730

FEC ID number of contributing federal political committee. **C**

Name of Employer A Renewal Enterprise Occupation Org Dev Consultant

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 278.83

Date of Receipt 05 / 15 / 2011
Transaction ID: C6495069
 Amount of Each Receipt this Period 500.00

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

Mailing Address 2614 N Dayton Street

City Chicago State IL Zip Code 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer Loyola University Occupation Historian

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2011
Transaction ID: C6363583
 Amount of Each Receipt this Period 250.00

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

Mailing Address 2S305 Kiowa Ct

City Wheaton State IL Zip Code 60189-7819

FEC ID number of contributing federal political committee. **C**

Name of Employer Chartis Insurance Occupation Insurance management

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 04 / 25 / 2011
Transaction ID: C6347688
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
Linus G Gylys

Mailing Address 13505 S. Redcoat Drive

City State Zip Code
Lemont IL 60439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Good Faith Effort Good Faith Effort

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 15 / 2011

Transaction ID: C6494982

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Lori A Hall

Mailing Address 12472 S. Moody

City State Zip Code
Palos Heights IL 60463

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Chicago Public Schools Teacher

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 15 / 2011

Transaction ID: C6495016

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
J P Hennessy

Mailing Address 1550 W. Cornelia Ave
Unit 406

City State Zip Code
Chicago IL 60657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Chartis Regional Manager

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 26 / 2011

Transaction ID: C6348297

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **180.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 76
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 3329 Hayes St

City State Zip Code
Evanston IL 60201-1831

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's Memorial Hospital
Occupation Registered Nurse

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 15 / 2011

Transaction ID: C6472933

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
Mike and Margaret Hojjat

Mailing Address 8429 Arrowhead Farm Dr

City State Zip Code
Burr Ridge IL 60527-0826

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed
Occupation construction

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 26 / 2011

Transaction ID: C6498918

Amount of Each Receipt this Period
100.00

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

Mailing Address 9424 Hamlin Ave

City State Zip Code
Evanston IL 60203-1304

FEC ID number of contributing federal political committee. **C**

Name of Employer Prairie Capital
Occupation Private Equity

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
04 / 12 / 2011

Transaction ID: C6300945

Amount of Each Receipt this Period
2100.00

SUBTOTAL of Receipts This Page (optional) ► **2215.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
E. Rune Lindgren

Mailing Address 1511 NW 28th St

City State Zip Code
Gainesville FL 32605-5037

FEC ID number of contributing federal political committee. **C**

Name of Employer (University of Florida) Occupation
Professor Emeritus

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 1

Transaction ID: C6299255

Amount of Each Receipt this Period
25.00

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

Mailing Address 2117 W Armitage Ave

City State Zip Code
Chicago IL 60647-4515

FEC ID number of contributing federal political committee. **C**

Name of Employer Willis Occupation
EB

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: C6349573

Amount of Each Receipt this Period
250.00

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

Mailing Address 12410 S Ridge Rd

City State Zip Code
Palos Park IL 60464-1767

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Self Employed

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 1 1

Transaction ID: C6346863

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **2775.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) John McCrudden		Date of Receipt MM / DD / YYYY 05 / 06 / 2011		
	Mailing Address 7216 S Spaulding Ave		Transaction ID: C6416562		
	City Chicago	State IL	Zip Code 60629-3542	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Local 134	Occupation Electrician			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 50.00			

B.	Full Name (Last, First, Middle Initial) Sean McMahon		Date of Receipt MM / DD / YYYY 04 / 26 / 2011		
	Mailing Address 4003 N Wolcott Ave Apt A		Transaction ID: C6348472		
	City Chicago	State IL	Zip Code 60613-4836	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Teng & Associates, Inc	Occupation Vice President			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00			

C.	Full Name (Last, First, Middle Initial) larry mertz		Date of Receipt MM / DD / YYYY 05 / 15 / 2011		
	Mailing Address 8425 Omaha Dr		Transaction ID: C6473165		
	City Burr Ridge	State IL	Zip Code 60527-0818	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer self	Occupation options trader			
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 100.00			

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
eric Mezmar
Mailing Address 619 Jackson Ave
City Naperville State IL Zip Code 60540-5207
FEC ID number of contributing federal political committee. **C**
Name of Employer willis Occupation ins broker
Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2500.00
Date of Receipt 05 / 15 / 2011
Transaction ID: C6473173
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Phil Nieman
Mailing Address 17032 89th Ave
City Orland Hills State IL Zip Code 60487-7207
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 50.00
Date of Receipt 05 / 28 / 2011
Transaction ID: C6499622
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Joseph M Perri
Mailing Address 4 Seneca Ct
City Burr Ridge State IL Zip Code 60527
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Graphic Designer
Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 0.00
Date of Receipt 05 / 15 / 2011
Transaction ID: C6495064
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 2750.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 17 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 6 Devon Ridge Ct

City State Zip Code
Burr Ridge IL 60527-8377

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ECC Insurance Brokers, Inc Insurance broker

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 11 / 2011

Transaction ID: C6418807

Amount of Each Receipt this Period
250.00

500.00

B. Full Name (Last, First, Middle Initial)
Mary Lou Rusco

Mailing Address 13605 S. Dublin Drive

City State Zip Code
Homer Glen IL 60491

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2011

Transaction ID: C6495030

Amount of Each Receipt this Period
100.00

100.00

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

Mailing Address 1809 Kelly Ct

City State Zip Code
Darien IL 60561-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Willis Sales

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2011

Transaction ID: C6362656

Amount of Each Receipt this Period
500.00

0.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

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

Mailing Address 626 N Taylor Ave

City State Zip Code
Oak Park IL 60302-1748

FEC ID number of contributing federal political committee. C

Name of Employer: Schnack Financial Group, Inc Occupation: President/CEO

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt 05 / 14 / 2011
Transaction ID: C6472757

Amount of Each Receipt this Period 100.00

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

Mailing Address 7 Chippewa Ct

City State Zip Code
Burr Ridge IL 60527-0814

FEC ID number of contributing federal political committee. C

Name of Employer: Hessville Pediatrics Occupation: Physician

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt 05 / 17 / 2011
Transaction ID: C6473825

Amount of Each Receipt this Period 500.00

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

Mailing Address 2426 Kenilworth Ave

City State Zip Code
Berwyn IL 60402-2545

FEC ID number of contributing federal political committee. C

Name of Employer: lisaref@glensidepld.org Occupation: librarian

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt 05 / 06 / 2011
Transaction ID: C6416474

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
Karen Siorek
Mailing Address 7348 W 108th Pl
City State Zip Code
Worth IL 60482-1106
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AERO Special Ed Coop Classroom Asst
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 50.00
Date of Receipt: 05 / 15 / 2011
Transaction ID: C6494991
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mark S Thoman
Mailing Address 1109 61st St
City State Zip Code
Downers Grove IL 60516
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Manufacturer's Representative
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 0.00
Date of Receipt: 05 / 15 / 2011
Transaction ID: C6494969
Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Christopher and Mari Warloe
Mailing Address 4714 N Maplewood Ave
City State Zip Code
Chicago IL 60625-2933
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Willis Insurance
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 75.00
Date of Receipt: 05 / 10 / 2011
Transaction ID: C6418261
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ► 175.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Chuck Wingard		Date of Receipt MM / DD / YYYY 05 / 15 / 2011		
	Mailing Address 572 S Brewster Ave		Transaction ID: C6495096		
	City Lombard	State IL	Zip Code 60148-2410	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Tree towns Reprographics, Inc.		Occupation President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00			

B.	Full Name (Last, First, Middle Initial) Robert Wislow		Date of Receipt MM / DD / YYYY 04 / 05 / 2011		
	Mailing Address 20 N Michigan Ave Ste 400		Transaction ID: C6292230		
	City Chicago	State IL	Zip Code 60602-4828	Amount of Each Receipt this Period 2500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer U. S. Equities Realty		Occupation CEO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00			

C.	Full Name (Last, First, Middle Initial) John Young		Date of Receipt MM / DD / YYYY 04 / 02 / 2011		
	Mailing Address PO Box 193		Transaction ID: C6289225		
	City Saint Joseph	State IL	Zip Code 61873-0193	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer St. Joseph - Ogden High School		Occupation School Bus Driver		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10.00			

SUBTOTAL of Receipts This Page (optional)	▶	2760.00
TOTAL This Period (last page this line number only)	▶	16950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 76
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt
	Mailing Address P.O. BOX 382110		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	CAMBRIDGE	MA	02238
	FEC ID number of contributing federal political committee.		Transaction ID: C6363585
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="240.12"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="384.18"/>	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt
	Mailing Address P.O. BOX 382110		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	CAMBRIDGE	MA	02238
	FEC ID number of contributing federal political committee.		Transaction ID: C6418863
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="72.03"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="384.18"/>	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) ALFAPAC		Date of Receipt
	Mailing Address 1650 King Street Suite 602		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		Transaction ID: C6418827
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1312.15"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 76
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial)
American Seniors Housing Association

Mailing Address 5225 Wisconsin Ave., NW
Suite 502

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 1 1

Transaction ID: C6363578

Amount of Each Receipt this Period
5000.00

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

Mailing Address 333 S Wabash Ave, 43rd Floor

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. **C** C00078287

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 0 / 2 0 1 1

Transaction ID: C6566134

Amount of Each Receipt this Period
-500.00

Insufficient Funds

C. Full Name (Last, First, Middle Initial)
SENIOR CARE INC FEDERAL PAC

Mailing Address 9510 ORMSBY STATION RD SUITE 101

City LOUISVILLE State KY Zip Code 40223

FEC ID number of contributing federal political committee. **C** C00325720

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 1 1

Transaction ID: C6363577

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

TOTAL This Period (last page this line number only) ► **7812.15**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 76	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Signature Bank		Date of Receipt
	Mailing Address 6400 N. Northwest Highway		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Chicago	IL	60631
	FEC ID number of contributing federal political committee.		Transaction ID: C6566079
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="2.88"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="3.26"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2.88"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2.88"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A. Full Name (Last, First, Middle Initial) 233 S. Wacker LLLC <hr/> Mailing Address 233 S. Wacker <hr/> City Chicago State IL Zip Code 60602 <hr/> Purpose of Disbursement Rent Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431186 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 1170.61
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Adducci, Dorf, Lehner, Mitchell & Blankenship, P.C. <hr/> Mailing Address 150 North Michigan, Suite 2130 <hr/> City Chicago State IL Zip Code 60601 <hr/> Purpose of Disbursement Legal services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431189 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 2760.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Matthew Elias <hr/> Mailing Address 235 W Van Buren St <hr/> City Chicago State IL Zip Code 60607-3918 <hr/> Purpose of Disbursement Technology consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431060 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5430.61

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Matthew Elias <hr/> Mailing Address 235 W Van Buren St <hr/> City Chicago State IL Zip Code 60607-3918 <hr/> Purpose of Disbursement Technology consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431065 Date of Disbursement 05 / 15 / 2011 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) Matthew Elias <hr/> Mailing Address 235 W Van Buren St <hr/> City Chicago State IL Zip Code 60607-3918 <hr/> Purpose of Disbursement Technology consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431104 Date of Disbursement 06 / 24 / 2011 <hr/> Amount of Each Disbursement this Period 750.00
C.	Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 5565 Glenridge Connector NE Suite 2000 <hr/> City Atlanta State GA Zip Code 30342 <hr/> Purpose of Disbursement Credit Card Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D432642 Date of Disbursement 04 / 04 / 2011 <hr/> Amount of Each Disbursement this Period 34.57

SUBTOTAL of Disbursements This Page (optional) ▶

2284.57

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432643</p> <p>Date of Disbursement MM / DD / YYYY 04 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 1328.61</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432644</p> <p>Date of Disbursement MM / DD / YYYY 04 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 1617.60</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432646</p> <p>Date of Disbursement MM / DD / YYYY 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 12.80</p>

SUBTOTAL of Disbursements This Page (optional)	2959.01
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432648</p> <p>Date of Disbursement 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 583.90</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432649</p> <p>Date of Disbursement 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 2709.84</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432688</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 840.22</p>

SUBTOTAL of Disbursements This Page (optional) ►

4133.96

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432689</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 98.80</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data Merchant Services</p> <p>Mailing Address 5565 Glenridge Connector NE Suite 2000</p> <p>City Atlanta State GA Zip Code 30342</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432690</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 3.40</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frederick Foote</p> <p>Mailing Address 6963 N. Hamilton</p> <p>City Chicago State IL Zip Code 60645</p> <p>Purpose of Disbursement Finance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431191</p> <p>Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1602.20

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Frederick Foote</p> <p>Mailing Address 6963 N. Hamilton</p> <p>City Chicago State IL Zip Code 60645</p> <p>Purpose of Disbursement Finance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431103</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Frederick Foote</p> <p>Mailing Address 6963 N. Hamilton</p> <p>City Chicago State IL Zip Code 60645</p> <p>Purpose of Disbursement Finance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431071</p> <p>Date of Disbursement 05 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frederick Foote</p> <p>Mailing Address 6963 N. Hamilton</p> <p>City Chicago State IL Zip Code 60645</p> <p>Purpose of Disbursement Finance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431072</p> <p>Date of Disbursement 06 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Frederick Foote <hr/> Mailing Address 6963 N. Hamilton <hr/> City Chicago State IL Zip Code 60645 <hr/> Purpose of Disbursement Finance consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431062 Date of Disbursement 05 / 12 / 2011 <hr/> Amount of Each Disbursement this Period 726.00
B.	Full Name (Last, First, Middle Initial) Dana French <hr/> Mailing Address 53 Terry Dr <hr/> City Sugar Grove State IL Zip Code 60554 <hr/> Purpose of Disbursement Band Performance at Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431069 Date of Disbursement 05 / 27 / 2011 <hr/> Amount of Each Disbursement this Period 400.00
C.	Full Name (Last, First, Middle Initial) Kelly Fryer <hr/> Mailing Address 909 N 7th Ave # 1 <hr/> City Tucson State AZ Zip Code 85705-7730 <hr/> Purpose of Disbursement Reimbursements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431077 Date of Disbursement 06 / 14 / 2011 <hr/> Amount of Each Disbursement this Period 877.43

SUBTOTAL of Disbursements This Page (optional) ▶

2003.43

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Kelly Fryer

Transaction ID: D431064
Date of Disbursement

Mailing Address 909 N 7th Ave
1

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

City Tucson State AZ Zip Code 85705-7730

Amount of Each Disbursement this Period

1875.00

Purpose of Disbursement
Communications Consulting

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Kelly Fryer

Transaction ID: D431061
Date of Disbursement

Mailing Address 909 N 7th Ave
1

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

City Tucson State AZ Zip Code 85705-7730

Amount of Each Disbursement this Period

760.40

Purpose of Disbursement
Travel Reimbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Kelly Fryer

Transaction ID: D431073
Date of Disbursement

Mailing Address 909 N 7th Ave
1

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	1	1

City Tucson State AZ Zip Code 85705-7730

Amount of Each Disbursement this Period

3750.00

Purpose of Disbursement
Communications Consulting

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ►

6385.40

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 76

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kelly Fryer</p> <p>Mailing Address 909 N 7th Ave # 1</p> <p>City Tucson State AZ Zip Code 85705-7730</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431074</p> <p>Date of Disbursement MM / DD / YYYY 06 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 3750.00</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kelly Fryer</p> <p>Mailing Address 909 N 7th Ave # 1</p> <p>City Tucson State AZ Zip Code 85705-7730</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431105</p> <p>Date of Disbursement MM / DD / YYYY 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 3750.00</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kelly Fryer</p> <p>Mailing Address 909 N 7th Ave # 1</p> <p>City Tucson State AZ Zip Code 85705-7730</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431192</p> <p>Date of Disbursement MM / DD / YYYY 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 9375.00</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

16875.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Leah Israel Mailing Address 655 W Irving Park Rd, #3617 City Chicago State IL Zip Code 60613 Purpose of Disbursement Finance consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431056 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1 Amount of Each Disbursement this Period 2000.00
B.	Full Name (Last, First, Middle Initial) Leah Israel Mailing Address 655 W Irving Park Rd, #3617 City Chicago State IL Zip Code 60613 Purpose of Disbursement Finance consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431059 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) Leah Israel Mailing Address 655 W Irving Park Rd, #3617 City Chicago State IL Zip Code 60613 Purpose of Disbursement Finance consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431063 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 1 1 Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Link Strategies <hr/> Mailing Address 321 East Walnut St #321 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Research Analysis Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431066 Date of Disbursement 05 / 20 / 2011 <hr/> Amount of Each Disbursement this Period 3369.11
B.	Full Name (Last, First, Middle Initial) Miles Boone Photography <hr/> Mailing Address 117 Second St <hr/> City Downers Grove State IL Zip Code 60515 <hr/> Purpose of Disbursement Photography Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431078 Date of Disbursement 06 / 14 / 2011 <hr/> Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 1225 Eye St, NW, Suite 1225 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Database software Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431067 Date of Disbursement 05 / 27 / 2011 <hr/> Amount of Each Disbursement this Period 2385.00

SUBTOTAL of Disbursements This Page (optional) ▶

6054.11

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 1225 Eye St, NW, Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Database software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431188</p> <p>Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 2308.00</p>
<p>B. Full Name (Last, First, Middle Initial) Normington, Petts & Associates</p> <p>Mailing Address 1010 Wisconsin Ave NW Suite 208</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Polling Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431190</p> <p>Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 20400.00</p>
<p>C. Full Name (Last, First, Middle Initial) Progress Printing</p> <p>Mailing Address 3324 S Halsted St #1</p> <p>City Chicago State IL Zip Code 60608</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431068</p> <p>Date of Disbursement 05 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 1380.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

24088.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Progress Printing <hr/> Mailing Address 3324 S Halsted St #1 <hr/> City Chicago State IL Zip Code 60608 <hr/> Purpose of Disbursement Printing Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431075 Date of Disbursement 06 / 14 / 2011 <hr/> Amount of Each Disbursement this Period 1202.00
B.	Full Name (Last, First, Middle Initial) Progress Printing <hr/> Mailing Address 3324 S Halsted St #1 <hr/> City Chicago State IL Zip Code 60608 <hr/> Purpose of Disbursement Printing Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431076 Date of Disbursement 06 / 14 / 2011 <hr/> Amount of Each Disbursement this Period 125.00
C.	Full Name (Last, First, Middle Initial) Michael Rendina <hr/> Mailing Address 915 W Dakin, Unit 1 <hr/> City Chicago State IL Zip Code 60613 <hr/> Purpose of Disbursement Management consulting Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431070 Date of Disbursement 05 / 27 / 2011 <hr/> Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3327.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Metropolitan Club</p> <p>Mailing Address 233 South Wacker Drive</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement Meeting Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431058</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 311.69</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) UPS Store</p> <p>Mailing Address 230 S Clark St</p> <p>City Chicago State IL Zip Code 60604</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431102</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 152.10</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wayne W. Haack Co</p> <p>Mailing Address 1010 Jorie Blvd Suite 120</p> <p>City Oak Brook State IL Zip Code 60523</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D431187</p> <p>Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 4476.75</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4940.54

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

90583.83

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Naomi Aberly Mailing Address 10210 Strait Ln City Dallas State TX Zip Code 75229 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431180 Date of Disbursement 06 / 24 / 2011	Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Deborah Andrzejewski Mailing Address 3 Seneca Ct City Burr Ridge State IL Zip Code 60527-0815 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431116 Date of Disbursement 06 / 24 / 2011	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Ms. Abbe Kahn Aron Mailing Address 95 Brentwood Dr City Glencoe State IL Zip Code 60022-1202 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431108 Date of Disbursement 06 / 24 / 2011	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Bonnie Atkinson <hr/> Mailing Address 8417 Arrowhead Farm Dr <hr/> City Burr Ridge State IL Zip Code 60527-0826 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431084 Date of Disbursement 06 / 20 / 2011 <hr/> Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Brenda Bacon <hr/> Mailing Address 14 Stead Ct <hr/> City Voorhees State NJ Zip Code 08043-4121 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D432693 Date of Disbursement 06 / 30 / 2011 <hr/> Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) Don Bailey <hr/> Mailing Address 27 Kitchell Rd <hr/> City Morristown State NJ Zip Code 07960-6950 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431131 Date of Disbursement 06 / 24 / 2011 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Mary Baker

Mailing Address 1656 W 101st Street

City Chicago State IL Zip Code 60643

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D431153

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Susan Berghoef

Mailing Address 30 W Oak St
Apt 3A

City Chicago State IL Zip Code 60610-8715

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D431126

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
Bruce Bronge

Mailing Address 6100 Ivanhoe Ave

City Lisle State IL Zip Code 60532-3145

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D431094

Date of Disbursement

06 / 20 / 2011

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

5100.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Bruce Bronge Mailing Address 6100 Ivanhoe Ave City Lisle State IL Zip Code 60532-3145 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D432697 Date of Disbursement 06 / 30 / 2011 Amount of Each Disbursement this Period 2500.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Mary Lynn Cali Mailing Address 410 Persimmon Dr City St. Charles State IL Zip Code 60174 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431106 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 250.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Mr. Jon Callahan Mailing Address 2010 W Bradley Pl City Chicago State IL Zip Code 60618-4908 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431111 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 1500.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Vicki Clark

Mailing Address 714 1/2 Poinsettia Ave

City State Zip Code
Corona Del Mar CA 92625-5525

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D432691
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Fay Clayton

Mailing Address 1044 Lake Shore Blvd

City State Zip Code
Evanston IL 60202-1433

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D431132
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Steven Cohen

Mailing Address 510 W Erie St
2202

City State Zip Code
Chicago IL 60654-6456

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D431119
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Nancy Crowell</p> <p>Mailing Address 2822 Broadway Ave</p> <p>City Kalamazoo State MI Zip Code 49008-2144</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431124</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 10.00</p>
<p>B. Full Name (Last, First, Middle Initial) Jean M. Dempsey</p> <p>Mailing Address 22041 N Prairie Lane</p> <p>City Kildeer State IL Zip Code 60047</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431091</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Kieran T. Dempsey</p> <p>Mailing Address 22041 N Prairie Lane</p> <p>City Kildeer State IL Zip Code 60047</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431085</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5010.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Katherine Doolin <hr/> Mailing Address 415 Sherwood Rd Apt 2 <hr/> City La Grange Park State IL Zip Code 60526-2082 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431176 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 50.00
B.	Full Name (Last, First, Middle Initial) Kathleen Duffy <hr/> Mailing Address 2624 N Richmond St Apt 3B <hr/> City Chicago State IL Zip Code 60647-1744 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431127 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 25.00
C.	Full Name (Last, First, Middle Initial) Thomas V. Ealy <hr/> Mailing Address 1541 West Wolfram Street <hr/> City Chicago State IL Zip Code 60657 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431134 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Matthew Elias</p> <p>Mailing Address 235 W Van Buren St</p> <p>City Chicago State IL Zip Code 60607-3918</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431114 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 35.00</p>
<p>B. Full Name (Last, First, Middle Initial) Michael Episcopo</p> <p>Mailing Address 2416 North Burling Street</p> <p>City Chicago State IL Zip Code 60614</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431136 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Ricardo Fernandez</p> <p>Mailing Address 8740 W Surrey Park</p> <p>City Palos Hills State IL Zip Code 60465-1192</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431159 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5035.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Rick Fernandez Mailing Address 9944 S Roberts Rd Ste 210 City Palos Hills State IL Zip Code 60465-1558 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431157 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 2500.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Stephanie Fields Mailing Address 3700 N Lake Shore Dr City Chicago State IL Zip Code 60613-4243 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431140 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 2500.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Thomas Filippini Mailing Address 1148 Oakley Ave City Winnetka State IL Zip Code 60093-1438 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431149 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 2500.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Paul J. Finnegan</p> <p>Mailing Address 1133 Michigan Ave</p> <p>City Evanston State IL Zip Code 60202-1437</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431169 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Craig Freedman</p> <p>Mailing Address 2332 N Janssen Ave</p> <p>City Chicago State IL Zip Code 60614-3020</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431122 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Kelly Fryer</p> <p>Mailing Address 909 N 7th Ave # 1</p> <p>City Tucson State AZ Zip Code 85705-7730</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431183 Date of Disbursement 06 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 471.17</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3471.17

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Laura Garfinkel

Transaction ID: D431179
Date of Disbursement

Mailing Address 1208 N Maplewood Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Peoria State IL Zip Code 61606-1038

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Contribution Refund

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Joseph Garofalo

Transaction ID: D431164
Date of Disbursement

Mailing Address 120 Wisner St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Park Ridge State IL Zip Code 60068-3548

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Thomas Gearen

Transaction ID: D431172
Date of Disbursement

Mailing Address 5549 Embassy St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Kalamazoo State MI Zip Code 49009-6497

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution Refund

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3550.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Virginia Helm</p> <p>Mailing Address 504 W Barry Ave # 4W</p> <p>City Chicago State IL Zip Code 60657-5423</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431141</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Bruce Heyman</p> <p>Mailing Address 2035 N Magnolia Ave</p> <p>City Chicago State IL Zip Code 60614-4009</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431150</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Vicki Heymann</p> <p>Mailing Address 2035 N. Magnolia Ave</p> <p>City Chicago State IL Zip Code 60614</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431151</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5050.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) George T. Hicks</p> <p>Mailing Address 4509 Alcott Dr</p> <p>City Nashville State TN Zip Code 37215-4001</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D432694</p> <p>Date of Disbursement 06 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mary Holcomb</p> <p>Mailing Address 23398 Chesapeake Dr</p> <p>City Barrington State IL Zip Code 60010</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431090</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Kelli Jones</p> <p>Mailing Address 3543 Butler Ave</p> <p>City Los Angeles State CA Zip Code 90066-2901</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431107</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 25.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

5025.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Eric Joost</p> <p>Mailing Address 51 Walker St Apt 5A</p> <p>City New York State NY Zip Code 10013-3663</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431166 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Stephen King</p> <p>Mailing Address 9424 Hamlin Ave</p> <p>City Evanston State IL Zip Code 60203-1304</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431097 Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 2100.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Stephen King</p> <p>Mailing Address 9424 Hamlin Ave</p> <p>City Evanston State IL Zip Code 60203-1304</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431120 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5600.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 52 / 76

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Tana Kjos	Transaction ID: D431182 Date of Disbursement 06 / 24 / 2011
	Mailing Address 909 N 7th Ave # 1	Amount of Each Disbursement this Period 250.00
	City Tucson State AZ Zip Code 85705-7730	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) robert lane	Transaction ID: D431152 Date of Disbursement 06 / 24 / 2011
	Mailing Address 265 Hawthorn Ave	Amount of Each Disbursement this Period 500.00
	City Glencoe State IL Zip Code 60022-1729	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Rodger Lederer	Transaction ID: D431139 Date of Disbursement 06 / 24 / 2011
	Mailing Address 14333 Kilbourne Ave	Amount of Each Disbursement this Period 50.00
	City Midlothian State IL Zip Code 60445-2624	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Dr. Gary Lipinski	Transaction ID: D431170 Date of Disbursement 06 / 24 / 2011
	Mailing Address 5 Seneca Court	
	City Burr Ridge State IL Zip Code 60527	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Michael C. Liss	Transaction ID: D431178 Date of Disbursement 06 / 24 / 2011
	Mailing Address 626 S Quincy St	
	City Hinsdale State IL Zip Code 60521-3954	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Rose Lizarraga	Transaction ID: D431087 Date of Disbursement 06 / 20 / 2011
	Mailing Address 1249 W. Webster Ave	
	City Chicago State IL Zip Code 60614	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Marcena W. Love

Mailing Address 1175 Pelham Rd

City Northfield State IL Zip Code 60093-2017

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Transaction ID: D431162
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
Aggie Lukaszewski

Mailing Address 535 Bellevue Ave
Apt 2

City Oakland State CA Zip Code 94610-5030

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Transaction ID: D431148
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)
William Mahoney

Mailing Address 11 E Walton St
Apt 3201

City Chicago State IL Zip Code 60611-5434

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Transaction ID: D431125
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4020.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
William Mastro

Transaction ID: D431163
Date of Disbursement

Mailing Address 12410 S Ridge Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Palos Park State IL Zip Code 60464-1767

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
John McGrath

Transaction ID: D431174
Date of Disbursement

Mailing Address 1720 W Wellington Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60657-4028

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Sean McMahon

Transaction ID: D431129
Date of Disbursement

Mailing Address 4003 N Wolcott Ave
Apt A

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60613-4836

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Scott Meyer <hr/> Mailing Address 1072 Reddington Dr <hr/> City Aurora State IL Zip Code 60502-9473 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431181 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Lucy Moog <hr/> Mailing Address 1908 N Orchard St <hr/> City Chicago State IL Zip Code 60614-5130 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431135 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Guy Morley <hr/> Mailing Address 10508 Walter Thompson Dr <hr/> City Vienna State VA Zip Code 22181-3030 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D431123 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Peter Muhlbach

Transaction ID: D431173
Date of Disbursement

Mailing Address 3590 Riverknoll Way

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City West Linn State OR Zip Code 97068-3639

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Ms. Grace Allen Newton, Esq.

Transaction ID: D431154
Date of Disbursement

Mailing Address 2135 N Cleveland Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60614-4508

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
michael o'roure

Transaction ID: D431128
Date of Disbursement

Mailing Address 6400 N Northwest Hwy
c/o signature bank

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60631-1877

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Mark Ohlendorf

Transaction ID: D431109
Date of Disbursement

Mailing Address N25 W30868 Overlook Court

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code
Pewaukee WI 53072

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Felix Ostrov

Transaction ID: D431145
Date of Disbursement

Mailing Address 518 Commanche Trl

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code
Wheeling IL 60090-5156

Amount of Each Disbursement this Period

10.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Joseph M Perri

Transaction ID: D431161
Date of Disbursement

Mailing Address 4 Seneca Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code
Burr Ridge IL 60527

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2710.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Joseph Plumeri

Transaction ID: D431095
Date of Disbursement

Mailing Address 995 5th Ave
FI 15

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

City New York State NY Zip Code 10028-0169

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Michael Pokora

Transaction ID: D431100
Date of Disbursement

Mailing Address 3416 White Eagle Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Naperville State IL Zip Code 60564-4621

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Michael Pokora

Transaction ID: D431101
Date of Disbursement

Mailing Address 3416 White Eagle Dr

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

City Naperville State IL Zip Code 60564-4621

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Renay Pokora Mailing Address 3416 White Eagle Drive City Naperville State IL Zip Code 60564 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431098 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 1 1 Amount of Each Disbursement this Period 2500.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Renay Pokora Mailing Address 3416 White Eagle Drive City Naperville State IL Zip Code 60564 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431099 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1 Amount of Each Disbursement this Period 2500.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Ms. Laura Ricketts Mailing Address 1615 W Rosehill Dr City Chicago State IL Zip Code 60660-4017 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431088 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 1 1 Amount of Each Disbursement this Period 2500.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Timothy Rivelli

Transaction ID: D431177

Date of Disbursement

Mailing Address 533 W 6th St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Hinsdale State IL Zip Code 60521-3981

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
James Ruston

Transaction ID: D431171

Date of Disbursement

Mailing Address 1809 Kelly Ct

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Darien State IL Zip Code 60561-5601

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Andrew Schapiro

Transaction ID: D431165

Date of Disbursement

Mailing Address 57 E Delaware Pl

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60611-1476

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) David R. Scherer	Transaction ID: D431089 Date of Disbursement 06 / 20 / 2011
	Mailing Address 1249 W. Webster Ave.	Amount of Each Disbursement this Period 2500.00
	City Chicago State IL Zip Code 60614-3139	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Linda Schilling	Transaction ID: D431117 Date of Disbursement 06 / 24 / 2011
	Mailing Address 2626 Cove St	Amount of Each Disbursement this Period 1000.00
	City Corona Del Mar State CA Zip Code 92625-2812	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Patrick Schmidt	Transaction ID: D431083 Date of Disbursement 06 / 20 / 2011
	Mailing Address 2401 Pennsylvania Ave NW Apt 703	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20037-1734	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Patrick Schmidt</p> <p>Mailing Address 2401 Pennsylvania Ave NW Apt 703</p> <p>City Washington State DC Zip Code 20037-1734</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431147</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Scott Schreiber</p> <p>Mailing Address 1565 Woodcrest Ct</p> <p>City Aurora State IL Zip Code 60502-1324</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431168</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mark Schulte</p> <p>Mailing Address 23398 Chesapeake Drive</p> <p>City Barrington State IL Zip Code 60010</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431086</p> <p>Date of Disbursement 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Nasir Shamsi <hr/> Mailing Address 7 Chippewa Ct <hr/> City Burr Ridge State IL Zip Code 60527-0814 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431138 Date of Disbursement 06 / 24 / 2011 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Sharon Sheriff <hr/> Mailing Address 5621 Ottershaw Court <hr/> City Brentwood State TN Zip Code 37027 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D432696 Date of Disbursement 06 / 30 / 2011 <hr/> Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) W.E. Sheriff <hr/> Mailing Address 5621 Ottershaw Court <hr/> City Brentwood State TN Zip Code 37027 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D432695 Date of Disbursement 06 / 30 / 2011 <hr/> Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Michael Small</p> <p>Mailing Address 2120 N Lincoln Park W Apt 8</p> <p>City Chicago State IL Zip Code 60614-4642</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431118 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Todd A Smith, Esq.</p> <p>Mailing Address 333 W Wellington Ave</p> <p>City Chicago State IL Zip Code 60657-5636</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431160 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C. Full Name (Last, First, Middle Initial) James Sterling</p> <p>Mailing Address 27 N. Wacker Unit 231</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431143 Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3750.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Derek Storm

Transaction ID: D431167
Date of Disbursement

Mailing Address 2021 Cheviot Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Inverness State IL Zip Code 60010-5635

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Tom Thilman

Transaction ID: D431130
Date of Disbursement

Mailing Address 1500 N Lake Shore Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60610-6686

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Tom Thilman

Transaction ID: D431093
Date of Disbursement

Mailing Address 1500 N Lake Shore Dr

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

City Chicago State IL Zip Code 60610-6686

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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

--

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Mark S Thoman Mailing Address 1109 61st St City Downers Grove State IL Zip Code 60516 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431137 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 75.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Jill Thomas Mailing Address 2251 E 39th St City Tulsa State OK Zip Code 74105-3407 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431112 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 2500.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Robert Thomas Mailing Address 2251 E 39th St City Tulsa State OK Zip Code 74105-3407 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D431113 Date of Disbursement 06 / 24 / 2011 Amount of Each Disbursement this Period 2500.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5075.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Susan Thomas

Transaction ID: D431194
Date of Disbursement

Mailing Address 1249 E 26th St

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

City State Zip Code
Tulsa OK 74114-2603

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
William Thomas

Transaction ID: D431115
Date of Disbursement

Mailing Address 1249 E 26th St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code
Tulsa OK 74114-2603

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Ann Treimer

Transaction ID: D431142
Date of Disbursement

Mailing Address 1101 North Elmwood Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code
Oak Park IL 60302

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund

--

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Grace Tsao-Wu</p> <p>Mailing Address 2332 N Janssen Ave</p> <p>City Chicago State IL Zip Code 60614-3020</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431121</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) John Waller</p> <p>Mailing Address 4427 N Hermitage Ave</p> <p>City Chicago State IL Zip Code 60640-5301</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431133</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Todd Wegman</p> <p>Mailing Address 884 N Marshfield Ave</p> <p>City Chicago State IL Zip Code 60622-5133</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431146</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Ronald Weiss

Transaction ID: D431144
Date of Disbursement

Mailing Address 1836 N Hudson Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City Chicago State IL Zip Code 60614-5202

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Bethine S. Whitney

Transaction ID: D431184
Date of Disbursement

Mailing Address 44 Pine Ct.

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

City Grosse Point Farms State MI Zip Code 48236

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Patricia Will

Transaction ID: D432692
Date of Disbursement

Mailing Address 630 Hedwig St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

City Houston State TX Zip Code 77024-5311

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution Refund
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

<p>A. Full Name (Last, First, Middle Initial) Chuck Wingard</p> <p>Mailing Address 572 S Brewster Ave</p> <p>City Lombard State IL Zip Code 60148-2410</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431156</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Robert Wislow</p> <p>Mailing Address 20 N Michigan Ave Ste 400</p> <p>City Chicago State IL Zip Code 60602-4828</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431175</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Joseph Zefran</p> <p>Mailing Address 5419 N Sawyer Ave</p> <p>City Chicago State IL Zip Code 60625-3925</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D431110</p> <p>Date of Disbursement 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 10.00</p>

SUBTOTAL of Disbursements This Page (optional)	3260.00
TOTAL This Period (last page this line number only)	166281.17

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) ALFAPAC	Transaction ID: D431185 Date of Disbursement 06 / 27 / 2011
	Mailing Address 1650 King Street Suite 602 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1000.00 Category/Type
B.	Full Name (Last, First, Middle Initial) American Seniors Housing Association	Transaction ID: D431193 Date of Disbursement 06 / 27 / 2011
	Mailing Address 5225 Wisconsin Ave., NW Suite 502 City Washington State DC Zip Code 20015 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.	Full Name (Last, First, Middle Initial) Foster for Congress Mailing Address PO BOX 703 City Geneva State IL Zip Code 60134 Purpose of Disbursement Campaign Contribution Candidate Name William G Foster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	Transaction ID: D431082 Date of Disbursement 06 / 17 / 2011 Amount of Each Disbursement this Period 2000.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Friends of Durbin Mailing Address 101 West Grand Ave #200 City Chicago State IL Zip Code 60610 Purpose of Disbursement Campaign Contribution Candidate Name Richard J Durbin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	Transaction ID: D431080 Date of Disbursement 06 / 17 / 2011 Amount of Each Disbursement this Period 2000.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Raja for Congress Mailing Address P.O. Box 958033 City Hoffman Estates State IL Zip Code 60195 Purpose of Disbursement Campaign Contribution Candidate Name Raja S Krishnamoorthi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	Transaction ID: D431079 Date of Disbursement 06 / 17 / 2011 Amount of Each Disbursement this Period 2000.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Atkinson for Congress

A.

Full Name (Last, First, Middle Initial)
Schakowsky for Congress

Mailing Address PO Box 5130

City State Zip Code
Evanston IL 60204

Purpose of Disbursement
Campaign Contribution

Candidate Name
Janice D Schakowsky

Office Sought: House
 Senate
 President

State: IL District: 09

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: D431081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
Atkinson for Congress

Transaction ID: L683

LOAN SOURCE Full Name (Last, First, Middle Initial) John Atkinson, PERS FUNDS - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8417 Arrowhead Farm Dr	
City Burr Ridge State IL ZIP Code 60527-0826	

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YYYY 03 02 2011	Date Due Due on Demand	Interest Rate 2.44 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="100000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
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 (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
Atkinson for Congress

Transaction ID: L684

LOAN SOURCE Full Name (Last, First, Middle Initial) John Atkinson, PERS FUNDS - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8417 Arrowhead Farm Dr	
City Burr Ridge State IL ZIP Code 60527-0826	

Original Amount of Loan 170000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 170000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YYYY 03 31 2011	Date Due Due on Demand	Interest Rate 2.44 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="170000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="270000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.