

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
**CITIZENS FOR RUSH**

ADDRESS (number and street) P. O. Box 7292  
 Check if different than previously reported. (ACC) CHICAGO IL 60680-7292

2. **FEC IDENTIFICATION NUMBER** ▼ C C00257121 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
IL 01

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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
02 / 25 / 2016 through 03 / 31 / 2016

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 Sheila L. Jackson  
Signature of Treasurer Sheila L. Jackson *[Electronically Filed]* Date M M / D D / Y Y Y Y  
04 / 15 / 2016

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
**CITIZENS FOR RUSH**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	107585.00	416655.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	107585.00	416655.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	155258.25	460897.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	300.00	300.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	154958.25	460597.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	22099.99	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	25589.43	

**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

**CITIZENS FOR RUSH**

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 25 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23000.00	116450.00
(ii) Unitemized.....	235.00	505.00
(iii) TOTAL of contributions from individuals ▶	23235.00	116955.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	84350.00	299700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	107585.00	416655.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	300.00	300.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	107885.00	416955.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	155258.25	460897.92
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 .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	5200.00	14950.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	160458.25	475847.92

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	74673.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	107885.00
25. SUBTOTAL (add Line 23 and Line 24).....	182558.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	160458.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22099.99

**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 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**Richard R. Boykin**

Mailing Address P.O. Box 805901

City Chicago State IL Zip Code 60680

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

Name of Employer: Barnes and Thornburg Occupation: Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 09 / 2016

**Transaction ID : SA11AI.17746**

Amount of Each Receipt this Period: 2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Joan E. Clifford**

Mailing Address 840 N. Lake Shore Drive

City Chicago State IL Zip Code 60611-2489

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

Name of Employer: REQUESTED Occupation: REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 03 / 10 / 2016

**Transaction ID : SA11AI.17755**

Amount of Each Receipt this Period: 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Robert A. Clifford**

Mailing Address 120 N. LaSalle Street

City Chicago State IL Zip Code 60602

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

Name of Employer: Clifford Law Offices Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 03 / 10 / 2016

**Transaction ID : SA11AI.17757**

Amount of Each Receipt this Period: 2700.00

Memo Item

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

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

7400.00

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

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

FOR LINE NUMBER: PAGE 6 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY C 'HANK' hnk JOHNSON**

Mailing Address 4153 FLAT SHOALS PARKWAY  
SUITE 322, BLDG. C, 2ND FLOOR

City DECATUR State GA Zip Code 30034

FEC ID number of contributing federal political committee. **C H6GA04129**

Name of Employer n/a Occupation n/a

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.17698**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Walter Jones Jr.**

Mailing Address 1331 Jackson

City River Foest State IL Zip Code 60305

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

Name of Employer Requested Occupation Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.17533**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Nyea McGriff**

Mailing Address 6139 S.Drexel Ave., 1S

City Chicago State IL Zip Code 60637

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

Name of Employer Dream Town Realty Occupation Real Estate Broker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : SA11AI.17717**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

2500.00

**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 7 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**H. C. Medley Sr.**

Mailing Address 5050 S. Lake Shore Drive

City Chicago State IL Zip Code 60615

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

Name of Employer Requested Occupation Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 12 / 2016

**Transaction ID : SA11AI.17770**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**James D. Montgomery**

Mailing Address 5026 S. Greenwood Ave.

City Chicago State IL Zip Code 60615

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

Name of Employer James D Montgomery & Assc. LTD Occupation Attorney At Law, President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.17534**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Pauline M. Montgomery**

Mailing Address 5026 S. Greenwood Ave.

City Chicago State IL Zip Code 60615

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

Name of Employer N/A Occupation N/A

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.17537**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

6400.00

**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 8 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stanley C. Rakestraw**

Mailing Address 8801 S. Greenwood Ave.

City Chicago State IL Zip Code 60619

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

Name of Employer SCR Transportation Occupation VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2016

**Transaction ID : SA11AI.17844**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Niranjan S. Shah**

Mailing Address 300 S. Wacker Drive Suite 200

City Chicago State IL Zip Code 60606-6716

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

Name of Employer Globetrotters Engineering Corp. Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : SA11AI.17758**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Kurt Summers**

Mailing Address 121 N. LaSalle St.

City Chicago State IL Zip Code 60602

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

Name of Employer City of Chicago Occupation Treasurer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.17797**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

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

6200.00



**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 9 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**Paul L. Williams**

Mailing Address 9346 S. Longwood

City Chicago State IL Zip Code 60620

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

Name of Employer Self-Employed Occupation Attorney at Law

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11Al.17799**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

**500.00**

**23000.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)**  
 Mailing Address 4301 WILSON BLVD  
 City State Zip Code  
 ARLINGTON VA 22203  
 FEC ID number of contributing federal political committee. **C C00002972**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016  
**Transaction ID : SA11C.17807**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

B. Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**  
 Mailing Address 1015 15TH ST. NW  
 SUITE 802  
 City State Zip Code  
 WASHINGTON DC 20005  
 FEC ID number of contributing federal political committee. **C C00010868**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016  
**Transaction ID : SA11C.17684**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

C. Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED**  
 Mailing Address 1625 L STREET NW  
 City State Zip Code  
 WASHINGTON DC 20036  
 FEC ID number of contributing federal political committee. **C C00011114**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016  
**Transaction ID : SA11C.17735**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

3000.00

**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 11 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

**Transaction ID : SA11C.17736**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE N W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : SA11C.17808**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 1300 Eye Street NW  
Suite 470 East

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.17847**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**AON CORPORATION POLITICAL ACTION COMMITTEE (AON PAC)**

Mailing Address 200 EAST RANDOLPH

City State Zip Code  
CHICAGO IL 60601

FEC ID number of contributing federal political committee. **C C00211250**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : SA11C.17761**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ARKEMA POLITICAL ACTION COMMITTEE**

Mailing Address 900 FIRST AVE

City State Zip Code  
KING OF PRUSSIA PA 19406

FEC ID number of contributing federal political committee. **C C00182980**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17694**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 175 E. Houston Street  
Room 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2650  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17690**

Amount of Each Receipt this Period  
 2650.00

Memo Item

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

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

6650.00

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

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

FOR LINE NUMBER: PAGE 13 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial)  
BAKERY, CONFECTIONERY, TOBACCO WORKERS AND GRAIN MILLERS INTERNATIONAL UNION PAC

A. Mailing Address 10401 CONNECTICUT AVENUE

City State Zip Code  
KENSINGTON MD 20895

FEC ID number of contributing federal political committee. **C** C00127621

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17679**

Amount of Each Receipt this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**BARNES AND THORNBURG POLITICAL ACTION COMMITTEE BT PAC**

B. Mailing Address 11 SOUTH MERIDIAN STREET

City State Zip Code  
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C** C00395947

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.17744**

Amount of Each Receipt this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**BECERRA FOR CONGRESS**

C. Mailing Address P.O. BOX 71584

City State Zip Code  
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00264101

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2016

**Transaction ID : SA11C.17839**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address P.O. Box 961039  
Suite 220

City Fort Worth State TX Zip Code 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11C.17765**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 501 WESTLAKE PARK BLVD

City HOUSTON State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

**Transaction ID : SA11C.17397**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CENTURYLINK INC. EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 150 FAYETTEVILLE STREET MALL  
SUITE 2810

City RALEIGH State NC Zip Code 27601

FEC ID number of contributing federal political committee. **C** C00419911

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**Transaction ID : SA11C.17846**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC**

Mailing Address 400 SOUTH LASALLE

City State Zip Code  
CHICAGO IL 60605

FEC ID number of contributing federal political committee. **C C00100693**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : SA11C.17760**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CME GROUP INC. PAC**

Mailing Address 20 SOUTH WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : SA11C.17762**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11C.17685**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial)  
**CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1400 16th Street NW  
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00262295**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17686**

Amount of Each Receipt this Period  
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)  
**DUPAGE MEDICAL GROUP LTD PAC**

Mailing Address 1100 WEST 31ST STREET  
SUITE 300

City DOWNERS GROVE State IL Zip Code 60515

FEC ID number of contributing federal political committee. **C C00435982**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : SA11C.17818**

Amount of Each Receipt this Period  
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)  
**FLORIDA DELIVERS LEADERSHIP PAC**

Mailing Address 3563 CARRIAGE WALK LANE

City LAUREL State MD Zip Code 20724

FEC ID number of contributing federal political committee. **C C00450247**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17677**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

2000.00



**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 17 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF DEVLIN SCHOOP**

Mailing Address P. O. BOX 6241

City State Zip Code  
CHICAGO IL 60680-6241

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.17747**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF TOM GREENHAW**

Mailing Address 901 N. WOOD ST., UNIT 2

City State Zip Code  
CHICAGO IL 60622

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11C.17825**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL MOTORS CORPORATION POLITICAL ACTION COMMITTEE (GM PAC)**

Mailing Address P.O. BOX 75000  
PAC SERVICES MC 2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : SA11C.17715**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4200.00

**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 18 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**GREATER OPPORTUNITIES FOR LEADERSHIP DEVELOPMENT (GOLD PAC)**

Mailing Address PO BOX 83142

City State Zip Code  
GAITHERSBURG MD 20883

FEC ID number of contributing federal political committee. **C C00452748**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : SA11C.17742**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GRIDIRON-PAC**

Mailing Address 280 Park Avenue

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.17848**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GRIDIRON-PAC**

Mailing Address 280 Park Avenue

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.17850**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

3000.00

**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 19 OF 85			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : SA11C.17835**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MACHINISTS NON-PARTISAN POLITICAL LEAGUE**

Mailing Address 9000 MACHINISTS PLACE

City UPPER MARLBORO State MD Zip Code 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : SA11C.17764**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1455 PENNSYLVANIA AVENUE, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : SA11C.17767**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

8000.00

**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 20 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY PELOSI FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00213512**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2016

**Transaction ID : SA11C.17768**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2016

**Transaction ID : SA11C.17766**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)**

Mailing Address 25 Massachusetts Ave. NW  
Ste 100

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17689**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 21 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 3 Commercial Place  
Suite 375

City Norfolk State VA Zip Code 23510

FEC ID number of contributing federal political committee. **C C00009282**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2016

**Transaction ID : SA11C.17838**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICAL ACTION COMMITTEE**

Mailing Address 1050 CONNECTICUT AVE NW STE 1100

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00368142**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : SA11C.17834**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**

Mailing Address 317 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17691**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

4500.00

**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 22 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**POWER PAC OF THE EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVENUE N W

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 02 / 2016**

**Transaction ID : SA11C.17693**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PRAIRIE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 2002

City SPRINGFIELD State IL Zip Code 62705

FEC ID number of contributing federal political committee. **C C00347195**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2016**

**Transaction ID : SA11C.17827**

Amount of Each Receipt this Period  
**2000.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 1900 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 07 / 2016**

**Transaction ID : SA11C.17732**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

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

**6000.00**

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**PROMISE PAC**

Mailing Address 413 NEW JERSEY AVENUE, SE  
BASEMENT LEVEL

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00528992

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 12 / 2016

**Transaction ID : SA11C.17793**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SERVICE EMPLOYEES INTERNATIONAL UNION**

Mailing Address 1800 MASSACHUSETTS AVENUE N W

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70003124

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11C.17811**

Amount of Each Receipt this Period  
2300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SERVICE EMPLOYEES INTERNATIONAL UNION**

Mailing Address 1800 MASSACHUSETTS AVENUE N W

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70003124

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : SA11C.17812**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.17830**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St., NW  
Suite 340

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17692**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
UNITE HERE TIP CAMPAIGN COMMITTEE

Mailing Address 275 Seventh Ave. 10th Floor

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C** C00004861

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.17676**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

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

7000.00



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

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

FOR LINE NUMBER: PAGE 25 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC GOOD GOVERNMENT CLUB (FKA BELL ATLANTIC CORPORATION PAC)

Mailing Address 1717 ARCH STREET 47TH FL S

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 04 2016

Transaction ID : SA11C.17716

Amount of Each Receipt this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC GOOD GOVERNMENT CLUB (FKA BELL ATLANTIC CORPORATION PAC)

Mailing Address 1717 ARCH STREET 47TH FL S

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 14 2016

Transaction ID : SA11C.17800

Amount of Each Receipt this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC GOOD GOVERNMENT CLUB (FKA BELL ATLANTIC CORPORATION PAC)

Mailing Address 1717 ARCH STREET 47TH FL S

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 14 2016

Transaction ID : SA11C.17801

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 3000.00  
**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 26 OF 85  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**WALGREEN CO PAC**

Mailing Address 200 WILMOT ROAD MS #2255

City DEERFIELD State IL Zip Code 60015

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2016

**Transaction ID : SA11C.17829**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

Memo Item

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

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

\_\_\_\_\_ 2000.00

\_\_\_\_\_ 84350.00

**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 27 OF 85
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

**A.** Full Name (Last, First, Middle Initial)  
**Third Baptist Church of Chicago**

Mailing Address 1500 W. 9th Street  
Heritage Plaza

City Chicago State IL Zip Code 60643

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA14.17832**

Amount of Each Receipt this Period  
300.00

Memo Item  
REFUND OF SECURITY DEPOSIT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

300.00

300.00

**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)		PAGE 28 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Advocacy Data</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2016
Mailing Address 4915 Auburn Ave. Suite 111		Amount of Each Disbursement this Period 5417.50
City Bethesda	State MD	
Purpose of Disbursement Email Voter Records	Zip Code 20914	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	<b>Transaction ID : SB17.17343</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fatimah Al-Nueridon</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 13929 S. Atlantic Ave.		Amount of Each Disbursement this Period 120.00
City /riverdale	State IL	
Purpose of Disbursement Election Day Worker	Zip Code 60827	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	<b>Transaction ID : SB17.18035</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Allstate Insurance Company</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address Not Available		Amount of Each Disbursement this Period 111.95
City Chicago	State IL	
Purpose of Disbursement AUTOMOBILE INSURANCE	Zip Code 60600	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : SB17.17916</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5529.45
<b>TOTAL</b> 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 29 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Allstate Insurance Company</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2016</b>
Mailing Address Not Available		Amount of Each Disbursement this Period <b>111.95</b>
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement AUTOMOBILE INSURANCE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>001</b>	<b>Transaction ID : SB17.17921</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMMONS TRANSPORTATION</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 29 / 2016</b>
Mailing Address N/A		Amount of Each Disbursement this Period <b>900.00</b>
City CHICAGO	State IL	
Zip Code 60600	Purpose of Disbursement BUS RENTAL FOR SENIOR BREAKFAST	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>007</b>	<b>Transaction ID : SB17.17914</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ms Chris Amos</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 15 / 2016</b>
Mailing Address 10623 S. Vernon		Amount of Each Disbursement this Period <b>120.00</b>
City Chicago	State IL	
Zip Code 60628	Purpose of Disbursement ELECTION DAY WORKER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>005</b>	<b>Transaction ID : SB17.18095</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1011.95</b>
<b>TOTAL</b> 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 30 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Samuel Anderson</b>			Date of Disbursement MM / DD / YYYY 02 / 25 / 2016	
Mailing Address 8937 S. EAST END Ave.			Amount of Each Disbursement this Period 1000.00	
City CHICAGO	State IL	Zip Code 60617	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Services Rendered		Category/Type 001		
Candidate Name			Transaction ID : <b>SB17.17338</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Samuel Anderson</b>			Date of Disbursement MM / DD / YYYY 03 / 18 / 2016	
Mailing Address 8937 S. EAST END Ave.			Amount of Each Disbursement this Period 1000.00	
City CHICAGO	State IL	Zip Code 60617	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SERVICES RENDERED		Category/Type 001		
Candidate Name			Transaction ID : <b>SB17.17904</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Carl Ankham</b>			Date of Disbursement MM / DD / YYYY 03 / 16 / 2016	
Mailing Address Requested			Amount of Each Disbursement this Period 1000.00	
City Chicago	State IL	Zip Code 60600	Memo Item <input type="checkbox"/>	
Purpose of Disbursement VIDEO SERVICES		Category/Type 001		
Candidate Name			Transaction ID : <b>SB17.17910</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 31 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Cecilia Arnold</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 228 Monroe Roa		Amount of Each Disbursement this Period 328.54 <input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18060</b>
City Bollingbrook	State IL	
Zip Code 60448	Purpose of Disbursement Election Day Worker	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mitchell Ashley</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 11406 S. Ada		Amount of Each Disbursement this Period 120.00 <input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17970</b>
City Chicago	State IL	
Zip Code 60643	Purpose of Disbursement Election Day Worker	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2016
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 328.54 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17873</b>
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement MOBIL PHONE EQUIPMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	328.54
<b>TOTAL</b> 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 32 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 501.41
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement MOBILE SERVICE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : SB17.17920</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. James Bentley</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 2648 E. 78th St.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60649	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	<b>Transaction ID : SB17.17993</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marina Berruhill</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 17340 Roy Street		Amount of Each Disbursement this Period 120.00
City Lansing	State IL	
Zip Code 60438	Purpose of Disbursement Election Day Worker - Drivee	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	<b>Transaction ID : SB17.17928</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	501.41
<b>TOTAL</b> 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 33 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Bistro Cacao</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2016	
Mailing Address Massachusetts Ave			Amount of Each Disbursement this Period 639.93	
City Washington	State DC	Zip Code 20000	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17510</b>	
Purpose of Disbursement FUNDRAISER VENUE (2/24/2016)		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. MICHILLA BLAISE</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2016	
Mailing Address 4328 N. Springfield			Amount of Each Disbursement this Period 4000.00	
City CHICAGO	State IL	Zip Code 60618	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17889</b>	
Purpose of Disbursement SERVICES RENDERED AS ELECTION DAY COORDINATOR		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. MICHILLA BLAISE</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 4328 N. Springfield			Amount of Each Disbursement this Period 1355.71	
City CHICAGO	State IL	Zip Code 60618	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17897</b>	
Purpose of Disbursement SUBWAY FOOD FOR ELECTION DAY WORKERS & BAGS FOR EDAY KITS		Category/Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5355.71
<b>TOTAL</b> 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 34 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Cecily Bousseau</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 8820 S. Stewart			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60621	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Election Day Worker		Category/ Type 005	<b>Transaction ID : SB17.18056</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Clinton Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 11358 S. Abridgeen St			Amount of Each Disbursement this Period 120.00	
City Chiago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Election Day Worker		Category/ Type 005	<b>Transaction ID : SB17.17977</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Randell Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2876 E. 77th St.			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Election Day Worker		Category/ Type 005	<b>Transaction ID : SB17.18009</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 35 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Theresa Brown</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1639 W. 93rd Pl		Amount of Each Disbursement this Period 60.00
City ChicGO	State IL	
Zip Code 60628	Purpose of Disbursement ELECTION DAY WORKER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18091</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CATERING BY AVALON</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 252.88
City CHICAGO	State IL	
Zip Code 60600	Purpose of Disbursement CATERING	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17875</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Courtney Chatman</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1303 W.Pratt		Amount of Each Disbursement this Period 250.00
City Chicago	State IL	
Zip Code 60628	Purpose of Disbursement ELECTION DAY WORKER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17937</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	252.88
<b>TOTAL</b> 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 36 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Patricia Chatman</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 621 East 112th Street			Amount of Each Disbursement this Period 60.00	
City Chicago	State IL	Zip Code 60628	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18051</b>	
Purpose of Disbursement Election Day Worker - Shirley Pearsin		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Larry Childres</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 11554 S. Morgan			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18074</b>	
Purpose of Disbursement ELECTION DAY WORKER		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. Michael Cobb</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 2876 E. 77th St.			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18003</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 37 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Willie Cole</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address Requested		Amount of Each Disbursement this Period 4000.00
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement CATERING - SENIOR BREAKFAST	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 007	<b>Transaction ID : SB17.17860</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cort Furniture Rental</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2016
Mailing Address 161 S. Gary Avenue		Amount of Each Disbursement this Period 1554.86
City Carol Stream	State IL	
Zip Code 60188	Purpose of Disbursement FURNITURE RENTAL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : SB17.17903</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Julian Cunto</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 11214 S. Langley		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60628	Purpose of Disbursement	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	<b>Transaction ID : SB17.17948</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5554.86
<b>TOTAL</b> 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 38 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. James Davis</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 9707 S. Prairie`			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17995</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Lorenzo Dumasv</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 2119 W 69th Place			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60636	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17991</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Dust Em Clean</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016		
Mailing Address 548 E. 61st Street			Amount of Each Disbursement this Period 300.00		
City Chicago	State IL	Zip Code 60637	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17902</b>		
Purpose of Disbursement OFFICE CLEANING		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> 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 39 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Stanley Evans</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 11533 S. Carpenter			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60643	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17974</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Family Dollar</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2016	
Mailing Address 11810 S. Western Ave.			Amount of Each Disbursement this Period 75.51	
City Chicago	State IL	Zip Code 60643	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17925</b>	
Purpose of Disbursement BAGS FOR ELECTION DAY KITS M.BLAISE		Category/ Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Troy R. Fleming</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 1130 W. 110th Place			Amount of Each Disbursement this Period 120.00	
City ChicGO	State IL	Zip Code 60643	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17966</b>	
Purpose of Disbursement ELECTION DAY WORKER		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 40 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Mihael Frazier</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 6715 181st Street			Amount of Each Disbursement this Period 120.00	
City Tinley Park	State IL	Zip Code 60477	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17934</b>	
Purpose of Disbursement election day worker - Driver		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Marcus Funches</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 438 W. 98th Street			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18028</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Adam Garay</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2876 E 77th Street			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17999</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 41 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Andrew Gibson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 792 S. Kirkland		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60652	
Purpose of Disbursement election Day worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17958</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Michael Gibson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 7942 S. Kirkland		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60652	
Purpose of Disbursement election day worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17956</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Michael Gibson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 7942 S. Kirkland		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60652	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17960</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 42 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Global Mixx Media Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016		
Mailing Address 5929 S. Calumet # 1			Amount of Each Disbursement this Period 6375.00		
City Chicago	State IL	Zip Code 60637	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Visibility		Category/ Type 004	Transaction ID : <b>SB17.17361</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Global Mixx Media Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016		
Mailing Address 5929 S. Calumet # 1			Amount of Each Disbursement this Period 2125.00		
City Chicago	State IL	Zip Code 60637	Memo Item <input type="checkbox"/>		
Purpose of Disbursement EDAY VISIBILITY		Category/ Type 004	Transaction ID : <b>SB17.17898</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Global Mixx Media Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016		
Mailing Address 5929 S. Calumet # 1			Amount of Each Disbursement this Period 6375.00		
City Chicago	State IL	Zip Code 60637	Memo Item <input type="checkbox"/>		
Purpose of Disbursement CAMPAIGN VISIBILITY		Category/ Type 004	Transaction ID : <b>SB17.17871</b>		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14875.00
<b>TOTAL</b> 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 43 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Grand Events, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016
Mailing Address 4828 S. Michigan Ave.		Amount of Each Disbursement this Period 350.00
City Chicago	State IL Zip Code 60615	
Purpose of Disbursement BALLOONS FOR VICTORY PARTY	Category/Type 007	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17888</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Graphic By Dzine</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 900.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement Graphic Design	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17372</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Graphic By Dzine</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 885.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement SERVICES RENDERED	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17905</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2135.00
<b>TOTAL</b> 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 44 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Anthony Graves</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 335 W. 138th Street			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18038</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. GREEK LIFE</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address REQUESTED			Amount of Each Disbursement this Period 250.00		
City CHICAGO	State IL	Zip Code 60600	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17880</b>		
Purpose of Disbursement ADVERTISEMENT		Category/ Type 004			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Montrell Green</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 12622 S. Union			Amount of Each Disbursement this Period 195.00		
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17935</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 004			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	250.00
<b>TOTAL</b> 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 45 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Marcus Hall</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 1106 Windermere Lane		Amount of Each Disbursement this Period 120.00
City Aurora	State IL Zip Code 60504	
Purpose of Disbursement Election Day Worker	Category/Type	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18011</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Harland Clarke</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address Not Available		Amount of Each Disbursement this Period 89.27
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement CHECK ORDER	Category/Type 001	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17917</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kenya Harper</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 950 W. 116th Place		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60643	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18072</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	89.27
<b>TOTAL</b> 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 46 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Paulette Harris</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 3757 S. Wabash Ave.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60653	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18082</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Harrison</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 5240 Winthrop		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18080</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jumah Hashim</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 11407 S. Michigan		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18040</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 47 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. HIGH STYLE MARKETING &amp; PR</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 47 W. Polk St. Ste. 103		Amount of Each Disbursement this Period 6000.00
City Chicago	State IL Zip Code 60605	
Purpose of Disbursement Sevices Rendered - February 2016		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17374</b>
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. IT'S A PARTH BOOTH</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 600.00
City CHICAGO	State IL Zip Code 60600	
Purpose of Disbursement SENIOR BREAKFAST EXPENSE		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17857</b>
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>C. Kevin D. Jackson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 4947 S. Vincennes		Amount of Each Disbursement this Period 120.00
City cHICAGO	State IL Zip Code 60615	
Purpose of Disbursement ELECTION AY WORKER		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18084</b>
State: District:	Category/Type 005	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6600.00
<b>TOTAL</b> 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 48 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Shavon Jackson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 6319 S. Damen		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60636	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.18017</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Sheila L. Jackson</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2016
Mailing Address P.O. Box 8443		Amount of Each Disbursement this Period 2000.00
City Chicago	State IL Zip Code 60680-8443	
Purpose of Disbursement CASH FOR OFFICE MGR. & EDAY SUPPLIES	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17883</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Sheila L. Jackson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address P.O. Box 8443		Amount of Each Disbursement this Period 23000.00
City Chicago	State IL Zip Code 60680-8443	
Purpose of Disbursement CASH TO PAY ELECTION DAY WORKERS, ETAL	Category/Type 005	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17887</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	25000.00
<b>TOTAL</b> 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 49 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Darrell Johnson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 8926 S. Justine			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18046</b>	
Purpose of Disbursement Election DDay Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Rickey Johnson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 6049 .S. Talman			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60629	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17952</b>	
Purpose of Disbursement electin day worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Edric Jones</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 7604 S. Luella			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18005</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 50 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. LeAlan M. Jones</b>			Date of Disbursement MM / DD / YYYY 02 / 25 / 2016	
Mailing Address 4712 S. St. Lawrence 1N			Amount of Each Disbursement this Period 6250.00	
City Chicago	State IL	Zip Code 60615	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Services Rendered - February 2016		Category/Type 001	<b>Transaction ID : SB17.17346</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LeAlan M. Jones</b>			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 4712 S. St. Lawrence 1N			Amount of Each Disbursement this Period 253.80	
City Chicago	State IL	Zip Code 60615	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Sr.. Breakfast - Reimbursement for the Printing of Programs		Category/Type 007	<b>Transaction ID : SB17.17859</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Herman Kennerly</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 2051 W.69th Place			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60636	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement election Day Worker		Category/Type 005	<b>Transaction ID : SB17.18013</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6503.80
<b>TOTAL</b> 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 51 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Kevron Printing &amp; Mailing, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016		
Mailing Address 9831 78th Avenue Unit F			Amount of Each Disbursement this Period 2090.00		
City Hickory Hills	State IL	Zip Code 60457	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Printing		Category/ Type 004	Transaction ID : <b>SB17.17373</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kevron Printing &amp; Mailing, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 9831 78th Avenue Unit F			Amount of Each Disbursement this Period 585.20		
City Hickory Hills	State IL	Zip Code 60457	Memo Item <input type="checkbox"/>		
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : <b>SB17.17882</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Jamy Lewis</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 755 E. 75th St.			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60619	Memo Item <input checked="" type="checkbox"/>		
Purpose of Disbursement Election Day Worker		Category/ Type	Transaction ID : <b>SB17.17954</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2675.20
<b>TOTAL</b> 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 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Charise Lyles</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 3560 West 85th Place			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60652	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18054</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Michael Lyles</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 11554 South Morgan Street			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18075</b>	
Purpose of Disbursement ELCTION DAY WORKER		Category/ Type 005		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Elaine Lyles`</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 11554 S. Morgan			Amount of Each Disbursement this Period 275.00	
City Chicago	State IL	Zip Code 60643	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18048</b>	
Purpose of Disbursement Electio Day orker		Category/ Type 006		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 53 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. MARIANO'S</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 1259.43
City CHICAGO	State IL	
Zip Code 60600	Purpose of Disbursement CATERING FOOD FOR VICTORY PARTY	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 007	Transaction ID : <b>SB17.17891</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Matthews</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 519 Candan Road		Amount of Each Disbursement this Period 140.00
City University Park	State IL	
Zip Code 60484	Purpose of Disbursement election day worker = driver	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 006	Transaction ID : <b>SB17.17932</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marvin McNeil</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 8153 S. Green		Amount of Each Disbursement this Period 250.00
City Chicago	State IL	
Zip Code 60653	Purpose of Disbursement ELECTION DAY WORKER-AREA COORDINATOR	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	Transaction ID : <b>SB17.18097</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1259.43
<b>TOTAL</b> 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 54 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. M G MEDA</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 250.00
City CHICAGO	State IL	
Purpose of Disbursement AD	Zip Code 60600	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17913</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. M G MEDA</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2016
Mailing Address REQUESTED		Amount of Each Disbursement this Period 250.00
City CHICAGO	State IL	
Purpose of Disbursement ADVEERTISING	Zip Code 60600	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17877</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Alicia Mitchell</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 6414 S. King Dr		Amount of Each Disbursement this Period 120.00
City Chicag	State IL	
Purpose of Disbursement Election Day Workr	Zip Code 60637	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17964</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> 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 55 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Felicia Mitchell</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 614 S. King Dr.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60637	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.17946</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Jeanette Mobley</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 9000 S. Laflin #3B		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60620	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.18021</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Hazel Neal</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 899 Mary Burne		Amount of Each Disbursement this Period 120.00
City Sauk Villiage	State IL Zip Code 60411	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.18058</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 56 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Salim AL Nurridin`</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 15 / 2016</b>
Mailing Address 1350 E. Sibley		Amount of Each Disbursement this Period <b>120.00</b>
City Dolton	State IL	
Zip Code 60419	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>005</b>	<b>Transaction ID : SB17.18024</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2016</b>
Mailing Address 5420 S. Lake Park Ave.		Amount of Each Disbursement this Period <b>182.60</b>
City Chicago	State IL	
Zip Code 60615	Purpose of Disbursement ELECTION DAY SUPPLIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>001</b>	<b>Transaction ID : SB17.17885</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Peter A. Palmer</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 15 / 2016</b>
Mailing Address 10552 . Vernon		Amount of Each Disbursement this Period <b>120.00</b>
City Chicago	State IL	
Zip Code 60628	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>005</b>	<b>Transaction ID : SB17.18007</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>182.60</b>
<b>TOTAL</b> 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 57 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. William Pass</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 8926 S. Justine		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.18030</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. LaRue Patterson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 892 S. East End		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60617	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.18076</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Louanner Peters</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 8858 S. Dauphin		Amount of Each Disbursement this Period 250.00
City Chicago	State IL Zip Code 60619	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17926</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 58 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Takoa S. Phillips</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 6650 S. Stewart Ave.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60621	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.18062</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Alisa Porter</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 3055 W. 69th Street		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60636	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.17997</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. John Preston</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2016
Mailing Address 3757 S Wabash #102		Amount of Each Disbursement this Period 375.00
City Chicago	State IL Zip Code 60653	
Purpose of Disbursement VISIBILITY IN 5th WARD	Category/Type 004	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : <b>SB17.17866</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	375.00
<b>TOTAL</b> 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 59 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Emanuel Ralford</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 2202 N. Major		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60638	
Purpose of Disbursement election ay Worker	Category/Type	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17939</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Rice</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1540 N. Lawwler		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement Election Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17985</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert Richardson</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 2850 W. Roosevelt		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60608	
Purpose of Disbursement Election Day Worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17940</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 60 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Shalamey Robinson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 114 S. Ada			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60607	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17983</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Erica Rogers</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 14230 S. Woodlawn			Amount of Each Disbursement this Period 120.00		
City Dolton	State IL	Zip Code 60419	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17942</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. Cora J. Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016		
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 3500.00		
City Lansing	State IL	Zip Code 60438	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17354</b>		
Purpose of Disbursement Services Rendered - February 2016		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3500.00
<b>TOTAL</b> 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 61 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 2000.00	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SENIOR BREAKFAST EXPENSES		Category/ Type 007	Transaction ID : <b>SB17.17856</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 03 / 07 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 150.00	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PHONE BANK EXPENSES		Category/ Type 005	Transaction ID : <b>SB17.17870</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 03 / 08 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 257.95	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CASH FOR PHONE BANK EXPENSES		Category/ Type 001	Transaction ID : <b>SB17.17911</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2407.95
<b>TOTAL</b> 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 62 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 908.00	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement ELECTION DAY EXPENSES		Category/ Type 007	Transaction ID : <b>SB17.17899</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 03 / 18 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 282.57	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CASH TO REIMBURSE RECEIPTS RECEIVED EDAY		Category/ Type 001	Transaction ID : <b>SB17.17900</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Cora J. Rush</b>			Date of Disbursement MM / DD / YYYY 03 / 21 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 464.44	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement EPENSE REIMBURSEMENT		Category/ Type 001	Transaction ID : <b>SB17.17912</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1655.01
<b>TOTAL</b> 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 63 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Flynn Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 3567 S. Rhodes			Amount of Each Disbursement this Period 250.00	
City Chicago	State IL	Zip Code 60615	<input type="checkbox"/> Memo Item	
Purpose of Disbursement SERVIES RENDERED ELECTION DAY		Category/Type 005	<b>Transaction ID : SB17.17896</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Jeffery Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016	
Mailing Address 5953 S. Kolman			Amount of Each Disbursement this Period 6250.00	
City Chicago	State IL	Zip Code 60629	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Sevices Rendered - February 2016		Category/Type 001	<b>Transaction ID : SB17.17353</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Jeffery Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016	
Mailing Address 5953 S. Kolman			Amount of Each Disbursement this Period 1154.96	
City Chicago	State IL	Zip Code 60629	<input type="checkbox"/> Memo Item	
Purpose of Disbursement REIMBURSEMENT FOR EDAY VAN RENTAL		Category/Type 001	<b>Transaction ID : SB17.17901</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7654.96
<b>TOTAL</b> 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 64 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Kacy Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 3562 S. Rhodes			Amount of Each Disbursement this Period 275.00	
City Chicago	State IL	Zip Code 60653	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18090</b>	
Purpose of Disbursement ELECTION DAY WORKER-AREA COORDINATOR		Category/Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Marlon Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 200.00	
City Lansing	State IL	Zip Code 60438	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17862</b>	
Purpose of Disbursement REIMBURSEMENT FOR SR. BRKFAST BUS RENTAL BALANCE		Category/Type 007		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Marlon Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 300.00	
City Lansing	State IL	Zip Code 60438	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17884</b>	
Purpose of Disbursement CASH FOR EXPENSES		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> 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 65 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Marlon Rush</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 18117 Brittany Lane			Amount of Each Disbursement this Period 6500.00	
City Lansing	State IL	Zip Code 60438	Memo Item <input type="checkbox"/>	
Purpose of Disbursement SERVICES RENDERDS AS CAMPAIGN MGR.- JANUARY		Category/ Type 001		
Candidate Name			Transaction ID : <b>SB17.17886</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Fantasia Sanders</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 7753 S. Essex			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60648	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name			Transaction ID : <b>SB17.18019</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Leonard Saunders</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016	
Mailing Address 7128 S Crlels			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement Election Day Workr		Category/ Type 005		
Candidate Name			Transaction ID : <b>SB17.18015</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6500.00
<b>TOTAL</b> 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 66 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Alicia W. Smith</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1401 K Street NW Suite 1200		Amount of Each Disbursement this Period 120.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Election Day worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18037</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charles Smith</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 12114 S. Wallace Ave.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60628	Purpose of Disbursement election day worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18093</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Elmer Keith Smith</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 11611 S. Aberdeen		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60643	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17972</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 67 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Walter Sparkman</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2016
Mailing Address P.O. Box 19242		Amount of Each Disbursement this Period 250.00
City Chicago	State IL	
Zip Code 60619	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17927</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SUBWAY</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 12121S. Western Ave.		Amount of Each Disbursement this Period 1355.71
City Chcago	State IL	
Zip Code 60600	Purpose of Disbursement LUNCH - EDAY M.BLAISE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 008	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17923</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Damaría Sutton</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 134 S. Fairfield		Amount of Each Disbursement this Period 120.00
City ChicGO	State IL	
Zip Code 60600	Purpose of Disbursement election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18026</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 68 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Karnetta Taylor</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 2832 141st Place		Amount of Each Disbursement this Period 120.00
City Blue Island	State IL	
Zip Code 60406	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17944</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Strategy Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address 730 N. Franklin		Amount of Each Disbursement this Period 19138.70
City Chicago	State IL	
Zip Code 60654-7205	Purpose of Disbursement Literature Printing and mailing	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17714</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Strategy Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 730 N. Franklin		Amount of Each Disbursement this Period 19138.70
City Chicago	State IL	
Zip Code 60654-7205	Purpose of Disbursement PRINTING & MAILING OF LITERATURE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.17865</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38277.40
<b>TOTAL</b> 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 69 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. The Strategy Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 730 N. Franklin			Amount of Each Disbursement this Period 9316.12		
City Chicago	State IL	Zip Code 60654-7205	<input type="checkbox"/> Memo Item		
Purpose of Disbursement PRINTING AN MAILING OF LITERATURE		Category/ Type 006	<b>Transaction ID : SB17.17863</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Third Baptist Church of Chicago</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016		
Mailing Address 1500 W. 9th Street Heritage Plaza			Amount of Each Disbursement this Period 1575.00		
City Chicago	State IL	Zip Code 60643	<input type="checkbox"/> Memo Item		
Purpose of Disbursement Venue - Senior Breakfast		Category/ Type 007	<b>Transaction ID : SB17.17355</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Stephen Thompson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 11 E 114th Street			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item		
Purpose of Disbursement Election Day worker		Category/ Type 005	<b>Transaction ID : SB17.18042</b>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10891.12
<b>TOTAL</b> 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 70 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Kahari Travis</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 7828 S.Essex			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60649	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17987</b>	
Purpose of Disbursement election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. U.S. Postmaster</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2016	
Mailing Address Various			Amount of Each Disbursement this Period 29.15	
City Chicago	State IL	Zip Code 60600	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17872</b>	
Purpose of Disbursement EXPRESS MAILING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Urban Partnership Bank</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2016	
Mailing Address PO Box 19260			Amount of Each Disbursement this Period 32.00	
City Chicago	State IL	Zip Code 60619-0260	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17394</b>	
Purpose of Disbursement Stop Payment Bank Service Charge		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	61.15
<b>TOTAL</b> 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 71 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Urban Partnership Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address PO Box 19260		Amount of Each Disbursement this Period 49.04
City Chicago	State IL Zip Code 60619-0260	
Purpose of Disbursement BANK SERVICE CHARGE	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17922</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Nkem Uwagboi</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 2101 S. Michigan # 1902		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement ELECTION DAY WORKER	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.17950</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Willie Walls</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 721 W. 87th Street		Amount of Each Disbursement this Period 120.00
City Chicago	State IL Zip Code 60620	
Purpose of Disbursement Election Day worker	Category/Type 005	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : SB17.18070</b>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49.04
<b>TOTAL</b> 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 72 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Lokia Washingt</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2016	
Mailing Address 6414 S. King Drive			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60614	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17962</b>	
Purpose of Disbursement Election Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Raymond Watkins</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 418 W. 166th Street			Amount of Each Disbursement this Period 120.00	
City Chicgo	State IL	Zip Code 60600	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18033</b>	
Purpose of Disbursement lection Day Worker		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Rev. Stanley Watkins</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2016	
Mailing Address 1241 East 98th Street			Amount of Each Disbursement this Period 639.93	
City Chicago	State IL	Zip Code 60628	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.17334</b>	
Purpose of Disbursement Reimbursement for Credit Card Charge - Bistro Ca		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	639.93
<b>TOTAL</b> 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 73 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Andrew Westbrook</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 12843 Irving Ave		Amount of Each Disbursement this Period 120.00
City Blue Island	State IL	
Zip Code 60406	Purpose of Disbursement ELECTION DAY WORKER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18078</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Regina Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 8014 Euclid		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60617	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18001</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Demetrias Whitney</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 8926 S. Justone		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement Election Day Worker	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18044</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 74 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. LaKeisha Williams</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 8900 S. Normal Ave			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60620	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17989</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Eric Wilkins</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 10560 S. Indiana			Amount of Each Disbursement this Period 140.00		
City Chicago	State IL	Zip Code 60628	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.17930</b>		
Purpose of Disbursement ELECTION DAY WORKER - DRIVER		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Connie Williamson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 6551 S. Yale			Amount of Each Disbursement this Period 120.00		
City Chicago	State IL	Zip Code 60621	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18063</b>		
Purpose of Disbursement Election Day Worker		Category/ Type 005			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 75 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Constance Williamson</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 2334 W Van Buren			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60612	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement election Day Worker		Category/ Type 005	<b>Transaction ID : SB17.18066</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Jerry Willis</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 4945 S. Vincennes			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60615	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement ELECTION DAY WORKER		Category/ Type 005	<b>Transaction ID : SB17.18086</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Arthur Yancy</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 6932 S. Lowe			Amount of Each Disbursement this Period 120.00	
City Chicago	State IL	Zip Code 60621	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Election Day Worker		Category/ Type 005	<b>Transaction ID : SB17.18069</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	154416.66

**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 76 OF 85
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. 18th Ward Democratic Organization</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016
Mailing Address 8146 S. Kedzie		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB21.17879</b>
City Chicago	State IL Zip Code 60652	
Purpose of Disbursement DONATION	Category/Type 011	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 5th Ward Regular Democratic Organization</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 2325 East 71st Street		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB21.17894</b>
City Chicago	State IL Zip Code 60649	
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. 8th Ward Regular Democratic Organization</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 8539 S. Cottage Grove		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item <b>Transaction ID : SB21.17895</b>
City Chicago	State IL Zip Code 60619	
Purpose of Disbursement CONTRIBUTION	Category/Type 011	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> 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 77 OF 85	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Bronzville Green</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 3757 S. Wabash Ave.		Amount of Each Disbursement this Period 500.00
City Chicago	State IL Zip Code 60653	
Purpose of Disbursement Donation	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 012		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB21.17364</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CALUMET TOWNSHIP REGULAR DEMOCRATIC PARTY</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 2030 High Street		Amount of Each Disbursement this Period 1000.00
City Blue Island	State IL Zip Code 60406-2502	
Purpose of Disbursement CONTRIBUTION	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB21.18088</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citizens for Pat Dowell</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 5044 S. State Street		Amount of Each Disbursement this Period 500.00
City Chicago	State IL Zip Code 60653	
Purpose of Disbursement CONTRIBUTION	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB21.18089</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> 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 78 OF 85	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

Full Name (Last, First, Middle Initial) <b>A. Coalition for the Remembrance of Elijah Muhammad</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2016</b>
Mailing Address <b>7435 West 71st Street</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Chicago</b> State <b>IL</b> Zip Code <b>60629</b>	<input type="checkbox"/> Memo Item	
Purpose of Disbursement <b>DONATION/ANNUAL FUNDRAISER</b>	<input type="checkbox"/> Category/ Type <b>012</b>	<b>Transaction ID : SB21.17868</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	<input type="checkbox"/> Memo Item	
Purpose of Disbursement	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	<input type="checkbox"/> Memo Item	
Purpose of Disbursement	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Amber, Inn</b>		Nature of Debt (Purpose): Space Rental
Mailing Address 3901 S. Michigan Avenue		
City	State	Zip Code
Chicago	IL	60653

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.2928</b>	
<input type="text" value="1300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1300.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Apostolic Faith Church</b>		Nature of Debt (Purpose): Refund
Mailing Address 3823 S. Indiana Ave.		
City	State	Zip Code
Chicago	IL	60653

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.457</b>	
<input type="text" value="500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>A T &amp; T</b>		Nature of Debt (Purpose): LONG DISTANCE
Mailing Address Bill Payment Center		
City	State	Zip Code
Chicago	IL	60600

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.2909</b>	
<input type="text" value="1318.61"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1318.61"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="3118.61"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Leah Bloomenthal</b>	Nature of Debt (Purpose): Office Supplies
Mailing Address 6325 N. Sheridan	
City State Zip Code Chicago IL 60647	

Outstanding Balance Beginning This Period 62.40	<b>Transaction ID : SD10.458</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 62.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chubb Group Insurance Companies</b>	Nature of Debt (Purpose): Insurance
Mailing Address 30 N. LaSalle Suite 3510	
City State Zip Code Chicago IL 60602	

Outstanding Balance Beginning This Period 1910.00	<b>Transaction ID : SD10.2924</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1910.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Citizens for Gary Lapille</b>	Nature of Debt (Purpose): Refund
Mailing Address P.O. Box 64665	
City State Zip Code Chicago IL 60664-1664	

Outstanding Balance Beginning This Period 2000.00	<b>Transaction ID : SD10.459</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	3972.40
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ComEd</b>		Nature of Debt (Purpose): Electricity
Mailing Address <b>Bill Payment Center</b>		
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60600</b>

Outstanding Balance Beginning This Period <input type="text" value="9.96"/>	<b>Transaction ID : SD10.8787</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9.96"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Friends of Bobby Rush</b>		Nature of Debt (Purpose): Estimated Debt for Space usage. Actual amount To Be Determined'
Mailing Address <b>P.O. Box 7292</b>		
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60680-7292</b>

Outstanding Balance Beginning This Period <input type="text" value="2100.00"/>	<b>Transaction ID : SD10.16392</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2100.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Grainger Terry, Inc.</b>		Nature of Debt (Purpose): Printing & Mailing
Mailing Address <b>1965 W. Pershing Road Building A, 3rd Floor</b>		
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60609</b>

Outstanding Balance Beginning This Period <input type="text" value="6890.00"/>	<b>Transaction ID : SD10.11451</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6890.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="8999.96"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Charisse Hodges</b>	Nature of Debt (Purpose): Salary
Mailing Address 3348 S. Giles Ave.	
City State Zip Code Chicago IL 60616	

Outstanding Balance Beginning This Period 850.00	<b>Transaction ID : SD10.460</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 850.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>James Biery Communications</b>	Nature of Debt (Purpose): Public Relations Fee
Mailing Address 435 W. Wisconsin	
City State Zip Code Chicago IL 60614	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : SD10.461</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lori Ann Bass &amp; Associates</b>	Nature of Debt (Purpose): Fundraising Fee
Mailing Address 730 N. Franklin	
City State Zip Code Chicago IL 60611	

Outstanding Balance Beginning This Period 94.54	<b>Transaction ID : SD10.462</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 94.54

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1944.54
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gil N. McCoy</b>		Nature of Debt (Purpose): Refund
Mailing Address 5210 S. Blackstone		
City	State	Zip Code
Chicago	IL	60615

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.451</b>	
<input type="text" value="1000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>People's Energy</b>		Nature of Debt (Purpose): Heating Fuel
Mailing Address Bill Payment Center		
City	State	Zip Code
Chicago	IL	60600

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.8788</b>	
<input type="text" value="1403.92"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1403.92"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Progressive Land Developers</b>		Nature of Debt (Purpose): Office Rent
Mailing Address 7801 S. Cottage Grove		
City	State	Zip Code
Chicago	IL	60619

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.452</b>	
<input type="text" value="1400.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1400.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="3803.92"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Trib-Co Construction**

Mailing Address 500 West Monroe

City State Zip Code  
 Chicago IL 60661

Nature of Debt (Purpose):  
 Refund

Outstanding Balance Beginning This Period **Transaction ID : SD10.453**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Trilla Stell Drum Corp.**

Mailing Address 2959 West 47th Street

City State Zip Code  
 Chicago IL 60632

Nature of Debt (Purpose):  
 Refund

Outstanding Balance Beginning This Period **Transaction ID : SD10.454**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Vision, Health Mgmt Systems**

Mailing Address 2838 S. Indiana

City State Zip Code  
 Chicago IL 60616

Nature of Debt (Purpose):  
 REfund

Outstanding Balance Beginning This Period **Transaction ID : SD10.455**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="750.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**CITIZENS FOR RUSH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robert Wright</b>		Nature of Debt (Purpose): Salary
Mailing Address 1212 S. Michigan		
City State	Zip Code	
Chicago	IL 60609	

Outstanding Balance Beginning This Period		Transaction ID : SD10.456	
3000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	3000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	25589.43
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	25589.43