

**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) .....	