



SECRETARY OF THE SENATE

08 DEC -5 AM 11: 09

P.O. Box 667  
Lombard • IL • 60148-0667  
(o) 630-424-3490 • (fax) 630-424-3495  
[www.sauerberg2008.com](http://www.sauerberg2008.com)

December 2, 2008

Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington, D.C. 20510-7116

RE: Sauerberg for U.S. Senate (C00435362)

- Post-General Report
- Amendments: (October 2008 Quarterly, Pre-General)
- Amended Statement of Organization


To Whom It May Concern:

Enclosed please find the Post-General report for Sauerberg for U.S. Senate (C00435362).

Additionally, please note amendments to the October 2008 Quarterly report (disbursement to Washington Mutual Business Card for \$10,584.87, dated 9/20/08) and Pre-General report (disbursement to Roger Sheeman, dated 10/15/08).

The Statement of Organization has been amended to update the committee address, email address, fax number and banking location. Please note that Chain Bridge Bank is no longer being used by the committee. Thank you.

Sincerely

  
Leonard Metzl, CPA  
Treasurer

28020774132

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

08 DEC -5 AM 11:09

Office Use Only

1. NAME OF  
COMMITTEE (in full)

USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼

Example: If typing, type  
over the lines

Sauerberg for US Senate

ADDRESS (number and street)

6330 Wesley Rd.



Check if different  
than previously  
reported. (ACC)

Willowbrook

IL

60527

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00435362

3. IS THIS  
REPORT



NEW  
(N)

OR



AMENDED  
(A)

IL

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

11

04

2008

in the  
State of

IL

5. Covering Period

10

16

2008

through

11

24

2008

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

Leonard Metzl

Signature of Treasurer

Electronically Filed by Leonard Metzl

Date

12

02

2008

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

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)

FE5AN018

28020774133

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Sauerberg for US Senate

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	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)).....	77462.87	99015.44
(b) Total Contribution Refunds (from Line 20(d)).....	800.00	3300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	76662.87	95715.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	119925.43	1004156.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4183.74
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	119925.43	999972.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1490327.28	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1313045.70	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

# POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

. If the candidate participated in the general election, use this form for the 30-day Post-General report.

. If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Sauerberg for US Senate

Report Covering the Period:

From:

M M	D D	Y Y Y Y
1 0	1 6	2 0 0 8

To:

M M	D D	Y Y Y Y
1 1	2 4	2 0 0 8

## I. RECEIPTS

**COLUMN A**  
Total this Period

**COLUMN B**  
Election Cycle Total as of

**COLUMN C**  
Total for

M M	D D	Y Y Y Y
1 1	0 4	2 0 0 8

(date of general election)

M M	D D	Y Y Y Y
1 1	0 5	2 0 0 8

(date after general election)

through

M M	D D	Y Y Y Y
1 1	2 4	2 0 0 8

(last day of reporting period)

### 11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than  
Political Committees  
(i) Itemized (Use Schedule A)

55699.84
----------

55699.84
----------

2210.80
---------

- (ii) Unitemized

15313.03
----------

15313.03
----------

325.00
--------

- (iii) Total of contributions from individuals

71012.87
----------

71012.87
----------

2535.80
---------

- (b) Political Party Committees

1350.00
---------

5077.94
---------

500.00
--------

- (c) Other Political Committees

5100.00
---------

22924.63
----------

0.00
------

**POST-ELECTION DETAILED  
SUMMARY PAGE**  
Report of Receipts and Disbursements

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
77462.87	99015.44	3035.80
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	1313045.70	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	1313045.70	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	4183.74	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	820.27	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
77462.87	1417065.15	3035.80

# POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committee Name

Sauerberg for US Senate

Report the covering period

From:

M M  
1 0D D  
1 6Y Y Y Y  
2 0 0 8

To:

M M  
1 1D D  
2 4Y Y Y Y  
2 0 0 8

## II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
119925.43	1004156.49	34112.43
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
800.00	1300.00	200.00
(b) Political Party Committees		
0.00	0.00	0.00

# POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

**COLUMN A**  
Total this period

**COLUMN B**  
Election Cycle Total as of \*  
(date of general election)  
(\* See page 5 for date)

**COLUMN C**  
Total for \*  
Through \*  
(date after general election)  
(last day of reporting period)  
(\* See page 5 for date)

(c) Other political committees (such as PACs)

0.00

2000.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

800.00

3300.00

200.00

21. OTHER DISBURSEMENTS

0.00

304654.93

0.00

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

120725.43

131211.42

34312.43

## III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

76662.87

95715.44

0.00

## IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

119925.43

999972.75

325.00

## V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....

1533589.84

24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....

77462.87

25. SUBTOTAL(add Line 23 and Line 24) .....

1611052.71

26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....

120725.43

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....

1490327.28

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

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

FOR LINE NUMBER:		PAGE 7 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) E Donation 1 Account Mailing Address 118 N. Saint Asaph St.  City Alexandria State VA Zip Code 22314-3110 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 244.72		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2008 Transaction ID: ABA9B3218E1A6444C9DE Amount of Each Receipt this Period 115.00  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) E Donation 1 Account Mailing Address 118 N. Saint Asaph St.  City Alexandria State VA Zip Code 22314-3110 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.52		Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2008 Transaction ID: A44B1DB7F54D04971BF1 Amount of Each Receipt this Period 105.80  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Adam N. Andrzejewski Mailing Address 281 E. May St  City Elmhurst State IL Zip Code 60126 FEC ID number of contributing federal political committee. C Name of Employer For the Good of Illinois Occupation Executive Director Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2008 Transaction ID: A14E9DA37659A43B3B0A Amount of Each Receipt this Period 125.00  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ..... ▶		345.80
TOTAL This Period (last page this line number only) ..... ▶		



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

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

FOR LINE NUMBER:		PAGE 8 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Victor Antonacci

Mailing Address 624 Parliament Ct.

City

Rockford

State

IL

Zip Code

61107-5081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lundholm Surgical

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A618051A7EBC64E05B99

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Louis Baker, Jr.

Mailing Address 1481 W Flint Ln

City

Romeoville

State

IL

Zip Code

60446-5240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A8E3E5344BD664318899

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Louis Baker, Jr.

Mailing Address 1481 W Flint Ln

City

Romeoville

State

IL

Zip Code

60446-5240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A52A50BC8A5874871AE1

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 104  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Errol Baptist

Mailing Address 5112 Parliament Place

City

Rockford

State

IL

Zip Code

61107-5066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2008

Transaction ID: AA96730E0E38C44118EB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Catherine C. barnum

Mailing Address 2419 Country Club Dr.

City

Quincy

State

IL

Zip Code

62301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A719BBE8EFB534B93AF8

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Christine W. Barr

Mailing Address 11315 Highland Dr

City

Plainfield

State

IL

Zip Code

60585-1961

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Homemaker

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

467.00

Date of Receipt

MM / DD / YYYY  
11 / 13 / 2008

Transaction ID: A0A26FEFD4BF9425DAD8

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1130.00

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

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

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

FOR LINE NUMBER:		PAGE 10 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. John R. Born

Mailing Address 2404King James Ave.

City

St. Charles

State

IL

Zip Code

60174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A8C67ADB53C66423CBCD

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Lin Bresnahan

Mailing Address 1104 Lodgepole Ct.

City

Darien

State

IL

Zip Code

60561-3889

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Clinical Social Worker

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: A6CB18B84C68F454395A

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert G Bryans

Mailing Address 673 N State Hwy 33

City

Flat Rock

State

IL

Zip Code

62427-3005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A0C9A5DDA36CC49DAA54

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

425.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 11 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. David Burkter Mailing Address 446 S. Adams St. City Hinsdale State IL Zip Code 60521-3909 FEC ID number of contributing federal political committee. C Name of Employer Cunningham Meyer & Vedrin- e, P.C. Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 1750.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 3 0 / 2 0 0 8 Transaction ID: A0B9ABCE9B0C543B5AC9 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Brian E. Calahan Mailing Address 1888 Hasting Ave. City Downers Grove State IL Zip Code 60516-2483 FEC ID number of contributing federal political committee. C Name of Employer Self Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Software Consulting Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 2 9 / 2 0 0 8 Transaction ID: A6179BFA39AA843F087A Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Matthew Carlyle Mailing Address 704 Violet Circle City Naperville State IL Zip Code 60540-9228 FEC ID number of contributing federal political committee. C Name of Employer U.S. Railroad Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Field Program Specialist Election Cycle-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y Y Y 1 0 / 3 0 / 2 0 0 8 Transaction ID: A0FB793506B994802ABD Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ..... ▶		650.00
TOTAL This Period (last page this line number only) ..... ▶		

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Howard B. Chodash

Mailing Address 3804 Indian Lands Lane

City

Springfield

State

IL

Zip Code

62711-8214

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern IL University

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AB9C41687B48E4A37958

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. William H. Collins

Mailing Address 10127 S. Leavitt St.

City

Chicago

State

IL

Zip Code

60643-1909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RW Collins Company

Occupation

CEO

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: A39E35DE239274E82BD3

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Terry L Conwell

Mailing Address 802 Forest Rd

City

La Grange Park

State

IL

Zip Code

60526-1610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ford Dealer

Occupation

Manager

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1225.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A89FB2CF2A3AD479D9E2

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 104  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. William J Cotter

Mailing Address 1708 Lakeview Dr

City

Darien

State

IL

Zip Code

60561-4912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
11 / 02 / 2008

Transaction ID: A38C43C3B8E364B74AE6

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert W. Crowther

Mailing Address 218 Shoreland Rd.

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rainmaker Robert Inc.

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A23EF7B9785D44FCA993

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Clifford Dibble

Mailing Address 5129 164th Ave. SE

City

Bellevue

State

WA

Zip Code

98006-5703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Microsoft

Occupation  
Program Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
10 / 24 / 2008

Transaction ID: A87F631E6583744FFBA2

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 104  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)  
Dr. Scott W. Divenere  
Mailing Address 4811 Wolf Rd.

City State Zip Code  
Western Springs IL 60558-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENT Surgical Consultants

Occupation  
Physician

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: A6829A13019124D86AE1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
Deborah D. Dixon  
Mailing Address 812 Hillgrove Ave.

City State Zip Code  
Western Springs IL 60558-1439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

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

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A505A2FAD6F75481CA18

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Mr. John C. Dodd  
Mailing Address 11 Hanover Ln.

City State Zip Code  
Sugar Grove IL 60554-9184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A57F2C32D95D24389ADF

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER:		PAGE 15 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. David B. Dopp

Mailing Address 3755 Queen Anne Ct.

City

Saint Charles

State

IL

Zip Code

60174-7800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edward Hospital

Occupation

Executive Director, Managed Care

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

10 / 21 / 2008

Transaction ID: AD7F135D37E144AB58A8

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Roger D'Orazio

Mailing Address 2335 N. Lincoln lake Dr.

City

Coal City

State

IL

Zip Code

60416-9510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Collision Revision

Occupation

CEO

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

10 / 23 / 2008

Transaction ID: AA95AA6F2C8E74F7A9F1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

James G Drake

Mailing Address 537 71st St

City

Darien

State

IL

Zip Code

60561-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plastic Film Corporation

Occupation

Warehouse Manager

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

10 / 20 / 2008

Transaction ID: AD96E44B06F2C4BE6848

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

James G Drake

Mailing Address 537 71st St

City

Darien

State

IL

Zip Code

60561-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plastic Film Corporation

Occupation

Warehouse Manager

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AEFD0603598564899AC9

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Paula A. Dulli

Mailing Address 881 Appomattox Circle

City

Naperville

State

IL

Zip Code

60540-7103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: AB9A3A9D2FE284B8BA5F

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Richard M. Farrell

Mailing Address 5660 West 95th Street

City

Oak Lawn

State

IL

Zip Code

60453-2380

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
11 / 13 / 2008

Transaction ID: AC559B2A78281424FB85

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1950.00

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

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

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

FOR LINE NUMBER:		PAGE 17 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Clark Fetridge

Mailing Address 1310 N. Ritchie Ct.

City

Chicago

State

IL

Zip Code

60610-2168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ravenswood Advisors

Occupation  
Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AE2A5349C52984D67AC1

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Lynda H. Filipello

Mailing Address 4401 Fender Rd

City

Lisle

State

IL

Zip Code

60532-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A65F47790D6BC4805B64

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mrs. C. Nina Fitzgerald

Mailing Address 1445-A Laughlin Ave.

City

McLean

State

VA

Zip Code

22101-5709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
10 / 31 / 2008

Transaction ID: A1E68E927236A455991F

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1925.00

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

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

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

FOR LINE NUMBER:		PAGE 18 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Robert Fliegelman Mailing Address 680 N. Lake Shore Dr. #202 City Chicago State IL Zip Code 60611-4404 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Metro Infectious Disease Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 11 / 03 / 2008 Transaction ID: A9F0C694FD162488C803 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Dr. G. Gary Gibbs Mailing Address 3912 Central Ave City Western Springs State IL Zip Code 60558-1126 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1300.00		Date of Receipt MM / DD / YYYY 10 / 30 / 2008 Transaction ID: A08D1B261F2AC4FDD822 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John E. Gocke Mailing Address 617 Courtland Cir City Western Springs State IL Zip Code 60558-1944 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Suburban Radiologists Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00		Date of Receipt MM / DD / YYYY 10 / 30 / 2008 Transaction ID: ACC924C7FD0BB4EF3B8C Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		2400.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER:		PAGE 19 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Richard A Goers</p> <p>Mailing Address 234 N Quincy St</p> <p>City Hinsdale State IL Zip Code 60521-3052</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 650.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 29 / 2008</p> <p>Transaction ID: AA3B7908E8FE549939A0</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Donald E Goss</p> <p>Mailing Address 4807 Johnson Ave</p> <p>City Western Springs State IL Zip Code 60558-1726</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Retired CPA</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 450.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 23 / 2008</p> <p>Transaction ID: A98505983508E42C1A58</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Patrick Graber</p> <p>Mailing Address 9750 S. Longwood Dr.</p> <p>City Chicago State IL Zip Code 60643-1610</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer McCullough, Campbell &amp; Lane LLP Occupation Attorney</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 23 / 2008</p> <p>Transaction ID: AEC62FA90C24D44629EA</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ 600.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

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

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

FOR LINE NUMBER: PAGE 20 / 104  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b>		Full Name (Last, First, Middle Initial) Mr. John B. Grissim		Date of Receipt MM / DD / YYYY 10 / 21 / 2008	
Mailing Address		4329 Grand Ave.		Transaction ID: AEEB9960D349D4AFF9D1	
City		State		Zip Code	
Western Springs		IL		60558-1437	
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period 200.00	
Name of Employer Lincoln Property Company		Occupation Executive Vice President		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 550.00			
<b>B.</b>		Full Name (Last, First, Middle Initial) Mr. Dennis Hamilton		Date of Receipt MM / DD / YYYY 10 / 18 / 2008	
Mailing Address		10664 E. Rush Town Rd.		Transaction ID: ACEB59B2BF3DE46D4900	
City		State		Zip Code	
Stockton		IL		61085-9750	
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period 25.00	
Name of Employer Information Requested		Occupation Retired Healthcare CEO		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 225.00			
<b>C.</b>		Full Name (Last, First, Middle Initial) Dr. Michel Hanna Malek		Date of Receipt MM / DD / YYYY 10 / 22 / 2008	
Mailing Address		577 W. Hawthorne Pl.		Transaction ID: A398327E87F6B4E1F90D	
City		State		Zip Code	
Chicago		IL		60657-2922	
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period 500.00	
Name of Employer Self		Occupation Physician		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional) .....				725.00	
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 21 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Joseph C. Hantsch Mailing Address 4612 Winchester Ave. City State Zip Code Lisle IL 60532-1546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 230.00		Date of Receipt MM / DD / YYYY 10 / 21 / 2008 Transaction ID: A8A4DAFF35832437C816 Amount of Each Receipt this Period 30.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John A Hardick Mailing Address 6025 N Rockwell St City State Zip Code Chicago IL 60659-4006 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1050.00		Date of Receipt MM / DD / YYYY 10 / 31 / 2008 Transaction ID: ACA6117D6A2D24CA1B60 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Rolf Eric Helland Mailing Address 115 GRANDIN ROAD City State Zip Code Morris IL 60450-7208 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer ILLINOIS TRUCK & EQUIPMENT Occupation Sales Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 10 / 27 / 2008 Transaction ID: A54A97729971E434DBFB Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) .....		580.00
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 22 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Frank L Hickisch, Jr.

Mailing Address 1215 Creekside Dr

City

Wheaton

State

IL

Zip Code

60187-6161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AB9F3E9277C0C42BAAF8

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. David Hines

Mailing Address 629 N. Oak Park Ave.

City

Oak Park

State

IL

Zip Code

60302-1643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metro Infectious Disease

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2008

Transaction ID: A02AE698B1FF14494944

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. John Hoelscher

Mailing Address 4900 Ridgewood lane

City

Alton

State

IL

Zip Code

62002-6977

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 26 / 2008

Transaction ID: A6DDDD8997AAE443BF990

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2200.00

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 23 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin Holland

Mailing Address 3007 Bennett Drive

City

Naperville

State

IL

Zip Code

60564-5176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Wealth Management

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: AA89789A9C34645E089C

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin Holland

Mailing Address 3007 Bennett Drive

City

Naperville

State

IL

Zip Code

60564-5176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Wealth Management

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

780.00

Date of Receipt

MM / DD / YYYY  
10 / 29 / 2008

Transaction ID: ADE4F05539E45450C899

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Roberta Hurley

Mailing Address 1116 Pine Ridge Rd.

City

Naperville

State

IL

Zip Code

60540-8143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: AD2E3C473F7ED43A4895

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1030.00

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 24 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Thomas R. Hurley

Mailing Address 1300 Cpperfield #4030

City

Joliet

State

IL

Zip Code

60432-2005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southwest Suburban Neurol-  
ogical Surgeon

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: A3D0DE44EEA0844BBB3C

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

John W. Hynds

Mailing Address PO Box 685

City

Morris

State

IL

Zip Code

60450-0685

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A85B95B9783384990BDA

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mrs. Maryd A Jones

Mailing Address 2701 Regency Oaks Blvd #A-312

City

Clearwater

State

FL

Zip Code

33759-1567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2008

Transaction ID: AC4FD2060B2484AEB8F8

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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 25 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Daniel M. Jurak

Mailing Address 935 E. Division

City

Diamond

State

IL

Zip Code

60416-1346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: A532B6795484E4B15945

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mark Kaufman

Mailing Address 3615 Adams Rd.

City

Oak Brook

State

IL

Zip Code

60523-2769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AthletiCo

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A79FA1623988943B2B1B

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Gary E Kemnitz

Mailing Address 1297 Herrington Rd

City

Geneva

State

IL

Zip Code

60134-3561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mueller & Company

Occupation

CPA

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: A681144AB089A4368BC6

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. John H. Kielczynski

Mailing Address 1925 W. 55th St.

City

La Grange

State

IL

Zip Code

60525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: AF40B502C103040EFB10

Amount of Each Receipt this Period

60.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Harold W. Knapheide

Mailing Address PO Box 7140

City

Quincy

State

IL

Zip Code

62305-7140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Knapheide Manufacturi-  
ng Company

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
11 / 04 / 2008

Transaction ID: AF0577E5CBA154BE5BF9

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Horst S. Korallus

Mailing Address 380 Holiday Dr.

City

Somonauk

State

IL

Zip Code

60552-9632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lisle Autoplaza

Occupation

Manager

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
11 / 04 / 2008

Transaction ID: A8F1B8111E806448A827

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1310.00

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 27 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Carolyn Krause

Mailing Address 518 Rosiland Rd.

City

Palatine

State

IL

Zip Code

60074-1093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
11 / 02 / 2008

Transaction ID: A47A890B522D94B3894E

Amount of Each Receipt this Period

75.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Glenn R. Krietsch

Mailing Address 4 Oak Brook Club Dr

City

Oak Brook

State

IL

Zip Code

60523-1347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New City Bank

Occupation

Banker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
10 / 31 / 2008

Transaction ID: A1FEE2E77906F4096BF4

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Thomas K. Kron

Mailing Address 539 Ridgemoor

City

Willowbrook

State

IL

Zip Code

60527-5358

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENT Surgical Consultants

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A100011AC427F4504938

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

475.00

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 28 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Paul L. Krug, Jr.

Mailing Address 439 N Madison St

City

Hinsdale

State

IL

Zip Code

60521-3224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Archer Daniels Midland

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AA7B34BFE2ABB43DFB87

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

William J. Krug

Mailing Address 122 Kraml Dr

City

Burr Ridge

State

IL

Zip Code

60527-0303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate Developer

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A08077EE202644841990

Amount of Each Receipt this Period

800.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

John A. Kuhlman

Mailing Address 2 Mid America Plaza  
Suite 700S

City

Oakbrook Terrace

State

IL

Zip Code

60181-4717

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dain Rauscher

Occupation

Senior Vice President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2947.11

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A02803769444340F6923

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1200.00

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 29 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. LaHart

Mailing Address 12431 S MEADE AVE

City

Palos Heights

State

IL

Zip Code

60463-1835

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY  
11 / 13 / 2008

Transaction ID: A11080981A20A4769A34

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Peter J. Lally

Mailing Address 616 S. Kensington

City

La Grange

State

IL

Zip Code

60525-2705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bear Stearns/JP Morgan

Occupation

Financial Consultant

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A3FA1C2826865486A935

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Gerald Lavengood

Mailing Address 220 E. Oak Street

City

Villa Park

State

IL

Zip Code

60181-2229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Pharmacist

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: AD6F97D84C3D8428EAB5

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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 30 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Bryan K. Lee

Mailing Address 241 E. 3rd St.

City

Hinsdale

State

IL

Zip Code

60521-4220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardiac Surgery Associates

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AF6103ED55AA943A1840

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Thomas C Liske

Mailing Address 79 N Royal Oaks Dr

City

Bristol

State

IL

Zip Code

60512-9700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Valley West Community Health

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

524.52

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A0D1E4567458B40C5BF1

Amount of Each Receipt this Period

164.52

In-kind: Food and drink for  
event  
☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Thomas C Liske

Mailing Address 79 N Royal Oaks Dr

City

Bristol

State

IL

Zip Code

60512-9700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Valley West Community Health

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

524.52

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: AFAF71DBEC7EF4566A5E

Amount of Each Receipt this Period

60.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

724.52

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 31 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Barbara Lorschach

Mailing Address 204 7th Ave.

City

La Grange

State

IL

Zip Code

60525-6406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Hospital Associa-  
tion

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: A7962FC7AF1E645B5AC1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Frank C. Madda

Mailing Address 3800 Highland Ave.

City

Downers Grove

State

IL

Zip Code

60515-1557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suburban Plastic Surgery

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2008

Transaction ID: A85EB080BD1194C0E93A

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Edward Marcowski

Mailing Address 727 Berkshire Ct.

City

Downers Grove

State

IL

Zip Code

60516-4920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PC Surgery Center

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A4E6D976553D24B5EB0B

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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 32 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis J. Massar

Mailing Address 1549 Colorado Ln

City

Elk Grove Village

State

IL

Zip Code

60007-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Matthew & Associates

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2150.00

Date of Receipt

10 / 21 / 2008

Transaction ID: A0B2526D4D28246969A9

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. William D. McCarthy

Mailing Address 160 East Grove PO Box 369

City

Sheldon

State

IL

Zip Code

60966-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

10 / 21 / 2008

Transaction ID: A7AA1C0C899B9482BBC3

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Jack McCook

Mailing Address 918 Linden Ct.

City

Western Springs

State

IL

Zip Code

60558-2213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

Date of Receipt

10 / 28 / 2008

Transaction ID: A0581F5065E8F418189A

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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 33 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)  
Mr. James D. McCormick  
Mailing Address 6520 S. Elm

City State Zip Code  
Burr Ridge IL 60527-5233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: AAFC7548C157B4A9CA70

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
Mr. Sean McLaughlin  
Mailing Address 9421 S. Millard

City State Zip Code  
Evergreen Park IL 60805-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beverly Bank

Occupation  
Vice President

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

Election Cycle-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
11 / 05 / 2008

Transaction ID: A666FD6BFE97840A7A0F

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Mr. Robert McNichols  
Mailing Address 218 Sunset Ridge

City State Zip Code  
Willowbrook IL 60527-8402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Austin A. Mc Nichols Insu-  
rance Agency

Occupation  
Insurance Agent

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

Election Cycle-to-Date ▼

525.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A6E10BAC2CED74549AA7

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

225.00

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 34 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard Metzl

Mailing Address 110 N. York Rd.

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

CPA

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A226FB2C228FC468EA7E

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Raymond J. Meyer, III

Mailing Address 7320 Saratoga Rd.

City

Morris

State

IL

Zip Code

60450-8403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rezin Orthopedic Center

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: AA66ACBD738B540DEBA4

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Michael H. Milani

Mailing Address 4206 Linden Ave

City

Western Springs

State

IL

Zip Code

60558-1261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adventist Midwest Health

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: AA1F377B5E6F8484181F

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Nancy G Milewski

Mailing Address 3265 Pitcher Dr

City

Darien

State

IL

Zip Code

60561-1715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U of I Medical

Occupation  
Nurse

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

430.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: A80DCF09533914B39BB3

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Nancy G Milewski

Mailing Address 3265 Pitcher Dr

City

Darien

State

IL

Zip Code

60561-1715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U of I Medical

Occupation  
Nurse

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: A50C9C14A205E439E898

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. James Miller

Mailing Address 1258 Golf View Dr.

City

Woodridge

State

IL

Zip Code

60517-7704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISA

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
11 / 10 / 2008

Transaction ID: A413D9CADC76A42B7B6C

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

150.00

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 36 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Arman Moseni

Mailing Address 12010 South Paulina

City

Calumet Park

State

IL

Zip Code

60827-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unicord

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: ADED486258029459B886

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Arman Moseni

Mailing Address 12010 South Paulina

City

Calumet Park

State

IL

Zip Code

60827-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unicord

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A6D371D8B0814498B9A1

Amount of Each Receipt this Period

650.00

☐ In-kind: Food and drink for  
event

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Robert D Mussey

Mailing Address 106 Meadow

City

Urbana

State

IL

Zip Code

61801-5822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2008

Transaction ID: A1672ED47ECF44613911

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

975.00

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 37 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Paul L. Novy

Mailing Address 798 Aspen

City

Buffalo Grove

State

IL

Zip Code

60089-1313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unemployed

Occupation

Administrative Assistant

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: AC13D52D87F734344858

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Malcolm E Nygren

Mailing Address 2901 Heathwood Ct

City

Champaign

State

IL

Zip Code

61822-7659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A68677F7A7FE44EFA96B

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark Pacelli

Mailing Address 206 W. Ayers

City

Hinsdale

State

IL

Zip Code

60521-3305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Financial Ananlyst

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: AB8F0D6E06565458598D

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

500.00

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 38 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel C. Pancake

Mailing Address 400 Village Circle Dr. PH.1

City

Willow Springs

State

IL

Zip Code

60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USI Inc.

Occupation

Senior Vice President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 31 / 2008

Transaction ID: ACB83939216DB4016824

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Umang Patel

Mailing Address 8585 Timberridge Trail

City

Burr Ridge

State

IL

Zip Code

60527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A07B3BB03CE4C44BCB99

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Ted Patras

Mailing Address 1401 S. Prairie

City

Chicago

State

IL

Zip Code

60605-2886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emergency Healthcare Phys-  
icians, Ltd.

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
11 / 01 / 2008

Transaction ID: A8300D5011E3E4FFBA15

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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 39 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Terry Peshia

Mailing Address 467 Maine St.

City

Oswego

State

IL

Zip Code

60543-9048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Garbe Iron Works Inc.

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

224.52

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A000BCE160D784097BE0

Amount of Each Receipt this Period

164.52

In-kind: Food and drink for  
event

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Anjali Peterson

Mailing Address 214 S. 6th Ave.

City

La Grange

State

IL

Zip Code

60525-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Realty Leaders

Occupation

Real Estate

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A0F6B7AD262CD43E3B88

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Harry M Peterson, Jr.

Mailing Address 1005 Bonnie Brae Pl 2 E

City

River Forest

State

IL

Zip Code

60305-1551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: A336D312B4F2E44F58B9

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

514.52

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 40 / 104	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Ryan J. Plzak

Mailing Address 1587 Arlington St.

City

Bolingbrook

State

IL

Zip Code

60490-4977

FEC ID number of contributing federal political committee.

C

Name of Employer  
Transread Warehouse

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: AAEABE7485AB04F35B1D

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Wayne Polek

Mailing Address 6N479 Splitrail Lane

City

Saint Charles

State

IL

Zip Code

60175-6960

FEC ID number of contributing federal political committee.

C

Name of Employer  
Kane Anesthesia Assoc.

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A64B33706E10B41EDB06

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. William W. Powell

Mailing Address 918 Waterford Ln

City

Northbrook

State

IL

Zip Code

60062-8619

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: AB38BE50BBAEE43D58B9

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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 41 / 104  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. David Printz

Mailing Address 122 Surrey Lane

City

Burr Ridge

State

IL

Zip Code

60527-5717

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Mgmt tech

Occupation

Owner

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2008

Transaction ID: A5BB4A1761CEC46A3A0D

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Richard J. Ready

Mailing Address 5562 S Stough St

City

Hinsdale

State

IL

Zip Code

60521-5127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adventist Midwest Health

Occupation

Physician

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: AC3723CD0D3BE406FB1E

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Cheryl K Reda

Mailing Address 121 Indian Wood Ln

City

Indian Head Park

State

IL

Zip Code

60525-3729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cottage Collection

Occupation

Owner

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A4FA81D880DA948ACAA4

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1200.00

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 42 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. James E. Rejowski

Mailing Address 3 Shiloh Ct

City

Burr Ridge

State

IL

Zip Code

60527-6399

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bulger, Rejowski & Dillon

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

MM / DD / YYYY  
10 / 16 / 2008

Transaction ID: AAEDCB108DA7D4406A58

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Roach

Mailing Address 511 N. Dover

City

La Grange Pk

State

IL

Zip Code

60526-5503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: ADEF5285C5DBF4910B86

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Elizabeth Rocci

Mailing Address 479 60th Place

City

Burr Ridge

State

IL

Zip Code

60527-5186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

MM / DD / YYYY  
10 / 27 / 2008

Transaction ID: A287FDE7A6043440DB41

Amount of Each Receipt this Period

1450.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1800.00

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 43 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.	Full Name (Last, First, Middle Initial) Joseph A. Rocci	Date of Receipt
	Mailing Address 479 60th Place	MM / DD / YYYY 10 / 27 / 2008
	City State Zip Code Burr Ridge IL 60527-5186	Transaction ID: A3D92A43C016F4C06AE8
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1475.00
	<div> Name of Employer Elcon </div> <div> Occupation Owner </div> <div> Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </div> <div> Election Cycle-to-Date ▼  1475.00 </div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B.	Full Name (Last, First, Middle Initial) Dr. John M. Ross	Date of Receipt
	Mailing Address 2201 W. 91st St.	MM / DD / YYYY 10 / 28 / 2008
	City State Zip Code Chicago IL 60620-6239	Transaction ID: A604F121D777548998F1
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00
	<div> Name of Employer Self </div> <div> Occupation Physician </div> <div> Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </div> <div> Election Cycle-to-Date ▼  600.00 </div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C.	Full Name (Last, First, Middle Initial) Dr. John Roth	Date of Receipt
	Mailing Address 402 Briar Lane	MM / DD / YYYY 10 / 22 / 2008
	City State Zip Code Morris IL 60450-1617	Transaction ID: A35F355DEFDCC459ABC4
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
	<div> Name of Employer Self </div> <div> Occupation Physician </div> <div> Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </div> <div> Election Cycle-to-Date ▼  250.00 </div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) .....		1925.00
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 44 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Dr. Peter C. Roumellotis</p> <p>Mailing Address 21525 Mattox Court</p> <p>City Shorewood State IL Zip Code 60404-6693</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Allen Medical Center Occupation Physician</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 21 / 2008</p> <p>Transaction ID: A2DF02E680C2E44219D4</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Dr. Stephen M. Rowley</p> <p>Mailing Address 740 N. East Ave.</p> <p>City Oak Park State IL Zip Code 60302-1541</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Midwest Heart Specialists Occupation Physician</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 18 / 2008</p> <p>Transaction ID: AECCA02E5AFF546CA8C0</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Michael Ruffner</p> <p>Mailing Address 40557 N. Minena</p> <p>City Antioch State IL Zip Code 60002-9763</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Gaian Occupation Operations Manager</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 225.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 28 / 2008</p> <p>Transaction ID: AB1B55EDDCDC14F5C969</p> <p>Amount of Each Receipt this Period 25.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p> <p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>1025.00</p>

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

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

FOR LINE NUMBER: PAGE 45 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Richard J. Ryan

Mailing Address 2369 Legacy Dr

City

Aurora

State

IL

Zip Code

60502-1379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Dentist

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A776F7C324EE043FBB10

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. Nishi Barman Sahgal

Mailing Address 5596 South Oak Street

City

Hinsdale

State

IL

Zip Code

60521-5017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metro Infectious Disease

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2008

Transaction ID: A5F0B228B10684608A7E

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Chris H. Sarlas, DDS

Mailing Address 12545 Richard Ave.

City

Palos Heights

State

IL

Zip Code

60463-1360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Pedodontist

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: A9F3DC5DF64E549DD9AA

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2300.00

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 46 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen Scaramuzzo

Mailing Address 2126 Carriage Hill Rd.

City

State

Zip Code

Lisle

IL

60532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plus Systems, Inc.

Occupation

Software Consultant

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: A20E20071C08C40CB9D6

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Rudolf G Schade, Jr.

Mailing Address 317 S. 7th Ave.

City

State

Zip Code

LaGrange

IL

60525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: A8783446D4C5B49F284B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Peter G Scheffler

Mailing Address 1 Bow Ln

City

State

Zip Code

Barrington

IL

60010-9618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
XFA

Occupation

Broker

Receipt For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: AC1AEE8B9C8B84FBF88A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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 47 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Michael J. Schied

Mailing Address 6470 Thunderbird Dr

City

Indian Head Park

State

IL

Zip Code

60525-4361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LaGrange Highlands

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A57F35942B317423A9FC

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Jack Sharkey

Mailing Address PO Box 3156

City

Quincy

State

IL

Zip Code

62305-3156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sharkey Transportation In-  
c.

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

MM / DD / YYYY  
11 / 13 / 2008

Transaction ID: AB31960CE2683472EA33

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Shields

Mailing Address 522 S. Park Rd.

City

La Grange

State

IL

Zip Code

60525-6113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Spencer Stuart

Occupation  
Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2008

Transaction ID: A4A01210B48BB42ED89A

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1100.00

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 48 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

John C. Shively

Mailing Address 315 Papillon Drive

City

Belleville

State

IL

Zip Code

62226-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southwestern Illinois Col-  
lege

Occupation

Mathmematics Teacher

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: A2E30923D1B604F8F938

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas M. Sodeika

Mailing Address 15 Pentwater Dr

City

BARRINGTON

State

IL

Zip Code

60010-9332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Precision Payroll

Occupation

President

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3560.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2008

Transaction ID: AB5059A9C6D2C4052A4D

Amount of Each Receipt this Period

60.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald J. Sounders

Mailing Address 725 Baker Dr.

City

Itasca

State

IL

Zip Code

60143-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jensen-Sounders Assoc.

Occupation

President

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
11 / 07 / 2008

Transaction ID: AA11F0DCB8CF4CE29E4

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

560.00

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 49 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Christina Steil

Mailing Address 949 Cleveland Rd.

City

Hinsdale

State

IL

Zip Code

60521-4809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2008

Transaction ID: A51DD3DCE770B43B7BA8

Amount of Each Receipt this Period

1600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Christina Steil

Mailing Address 949 Cleveland Rd.

City

Hinsdale

State

IL

Zip Code

60521-4809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: ACF38D750653C4F61B63

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory Steil

Mailing Address 949 Cleveland Road

City

Hinsdale

State

IL

Zip Code

60521-4809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATI Physical Therapy

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
10 / 20 / 2008

Transaction ID: AED186449C7614547BF0

Amount of Each Receipt this Period

1600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3700.00

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 50 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.	<p>Full Name (Last, First, Middle Initial) Mr. Gregory Steil</p> <p>Mailing Address 949 Cleveland Road</p> <p>City State Zip Code Hinsdale IL 60521-4809</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer ATI Physical Therapy</p> <p>Occupation CEO</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2600.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 30 / 2008</p> <p>Transaction ID: ADAA123F0CBAB4051B31</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
B.	<p>Full Name (Last, First, Middle Initial) Laurence O Stine</p> <p>Mailing Address 4830 Johnson Ave</p> <p>City State Zip Code Western Springs IL 60558-1725</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 28 / 2008</p> <p>Transaction ID: ACD0B1830953C471A98C</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
C.	<p>Full Name (Last, First, Middle Initial) Mike Swinford</p> <p>Mailing Address 111 E. Chestnut #51K</p> <p>City State Zip Code Chicago IL 60611-6029</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Rosenthal-Collins</p> <p>Occupation Commodities Broker</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1500.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 28 / 2008</p> <p>Transaction ID: A16BAD83E51CD48DB9B6</p> <p>Amount of Each Receipt this Period 1500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) .....</p>		<p>2200.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>		

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

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

FOR LINE NUMBER: PAGE 51 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Joyce E Tarra

Mailing Address 1568 W Ludington Cir

City

Romeoville

State

IL

Zip Code

60446-5313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A0B69D8705B6241D58CA

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Randall R. Truckenbrodt

Mailing Address 125 Indianwood Lane

City

Indian Head Park

State

IL

Zip Code

60525-3729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Randall Industries, Inc

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 31 / 2008

Transaction ID: A518E66E39FAD49E5B4F

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard E Vetrovec

Mailing Address 126 W 67th St.

City

Westmont

State

IL

Zip Code

60559-3400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: ABFDBFC1BE23D4FCE8E7

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

925.00

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 52 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Michael C. Vidas

Mailing Address 7301 N. Knoxville Ave.

City

Peoria

State

IL

Zip Code

61614-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peoria ENT Group

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
10 / 16 / 2008

Transaction ID: A15CF82C9165D4A45B4A

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Dr. James J. Walsh

Mailing Address 317 Springlake

City

Hinsdale

State

IL

Zip Code

60521-4751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
11 / 05 / 2008

Transaction ID: A7929853F04084178B24

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Timothy Walsh, DDS

Mailing Address 606 Lakeside Dr.

City

Hinsdale

State

IL

Zip Code

60521-5111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Dentist

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: A774488D33B0F4C46B27

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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 53 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Jay B. Walters

Mailing Address 842 Cleveland Rd.

City

Hinsdale

State

IL

Zip Code

60521-4857

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

10 / 20 / 2008

Transaction ID: AAF78B054D5DB48429AE

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Michael A. Wasz

Mailing Address 4052 Grove Ave.

City

Western Springs

State

IL

Zip Code

60558-1056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Franklin Templeton

Occupation

Sales

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

10 / 17 / 2008

Transaction ID: AAC2BCD3B98AC4980B54

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Gary R Waters

Mailing Address 2808 Deering Bay Dr

City

Naperville

State

IL

Zip Code

60564-4636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Customwood Stairs

Occupation

Manufacturing

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

10 / 21 / 2008

Transaction ID: A4670C1DE5EA244D4A8B

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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 54 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Brad Westrom

Mailing Address 1180 Squire Dr.

City

Aurora

State

IL

Zip Code

60505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Express System Inc.

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

10 / 30 / 2008

Transaction ID: A7823A491019B43359E4

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Brad Westrom

Mailing Address 1180 Squire Dr.

City

Aurora

State

IL

Zip Code

60505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Express System Inc.

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

10 / 30 / 2008

Transaction ID: AD3267D7E274B4D7C95B

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Mrs. Dorothy May Yurgaitis

Mailing Address 1329 Oakton Ln

City

Naperville

State

IL

Zip Code

60540-0344

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

430.00

Date of Receipt

10 / 21 / 2008

Transaction ID: AF18798447ACA4511A0E

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

930.00

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 55 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  Mrs. Dorothy May Yurgaitis</p> <p>Mailing Address 1329 Oakton Ln</p> <p>City State Zip Code  Naperville IL 60540-0344</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation  Retired</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  630.00</p>	<p>Date of Receipt  MM / DD / YYYY  10 / 30 / 2008</p> <p>Transaction ID: A6F15B8DEE4D044BFB96</p> <p>Amount of Each Receipt this Period  200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  Dr. Jeffrey Zawacki</p> <p>Mailing Address 3245 South Grove #202</p> <p>City State Zip Code  Berwyn IL 60402-3475</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Self Occupation  Physician</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  1050.00</p>	<p>Date of Receipt  MM / DD / YYYY  10 / 28 / 2008</p> <p>Transaction ID: A00EBF3E97BC74522A3F</p> <p>Amount of Each Receipt this Period  1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  Dr. Andrew Zelby</p> <p>Mailing Address 1124 Park Ave</p> <p>City State Zip Code  River Forest IL 60305-1310</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Neurological and Spine Surgery Center Occupation  Physician</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  2100.00</p>	<p>Date of Receipt  MM / DD / YYYY  10 / 16 / 2008</p> <p>Transaction ID: A8AD364E76D514CDF97F</p> <p>Amount of Each Receipt this Period  100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	



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

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

FOR LINE NUMBER:		PAGE 56 / 104							
(check only one)									
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d		
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mrs. Marybeth Zindrick

Mailing Address 6600 Shady Lane

City

Burr Ridge

State

IL

Zip Code

60527-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Homemaker

Receipt For: 2008

☐

Primary

☒

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
11 / 03 / 2008

Transaction ID: A99DCEBF768D443FE97A

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

200.00

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

55699.84

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

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

FOR LINE NUMBER: PAGE 57 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GOP Generation Y Fund</p> <p>Mailing Address PO Box 9055</p> <p>City Peoria State IL Zip Code 61612</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00448191</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 50.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 23 / 2008</p> <p>Transaction ID: AC5A37169A9AF4B4B8D5</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Hancock County Republican Central Committee</p> <p>Mailing Address 135 Pleasantview Dr.</p> <p>City Hamilton State IL Zip Code 62341-1108</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Date of Receipt MM / DD / YYYY 10 / 20 / 2008</p> <p>Transaction ID: AFB1076CD16814A8AA9B</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Menard County Republican Central Committee</p> <p>Mailing Address PO Box 284</p> <p>City Petersburg State IL Zip Code 62675</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 19 / 2008</p> <p>Transaction ID: AA27FF7BE34774A13A93</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ 650.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

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

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

FOR LINE NUMBER:		PAGE 58 / 104	
(check only one)			
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Wheatland Township Republican Organization Mailing Address 23641 W. Andrew Rd.  City Plainfield State IL Zip Code 60585-9748 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 10 / 17 / 2008 Transaction ID: AAB339EC0DA7B445E868 Amount of Each Receipt this Period 600.00  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) York Township Republican Women's Organization Mailing Address 1049 S. Edson Ave.  City Lombard State IL Zip Code 60148 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00		Date of Receipt MM / DD / YYYY 10 / 16 / 2008 Transaction ID: A041B152CC5D04BF9B15 Amount of Each Receipt this Period 100.00  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

1350.00

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

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

FOR LINE NUMBER: PAGE 59 / 104

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Friends to Re-Elect John Callahan

Mailing Address 222 W. Jackson St.

City

Morris

State

IL

Zip Code

60450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

10 / 22 / 2008

Transaction ID: A637DF819B93045198F1

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Senate Majority Fund

Mailing Address PO Box 32025

City

Phoenix

State

AZ

Zip Code

85064-2025

FEC ID number of contributing  
federal political committee.

C C00368431

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

10 / 20 / 2008

Transaction ID: ADD0AA435146F47FEAA4

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5100.00

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

5100.00

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

621 Diner

Mailing Address 621 E. Roosevelt Rd.

City Lombard State IL Zip Code 60148-4740

Purpose of Disbursement  
Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: BE7B649D57AF54A58A72

Date of Disbursement

10 / 06 / 2008

Amount of Each Disbursement this Period

69.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

7-Eleven

Mailing Address 6607 Joliet Road

City Indian Head Park State IL Zip Code 60525

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: B3F929AC35E64489E828

Date of Disbursement

10 / 08 / 2008

Amount of Each Disbursement this Period

58.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address POB 619612

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: B7F30D5A604F14121B67

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

651.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Aristotle International, INC

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Electronic software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: B7A91C0496C064DD5AC0

Date of Disbursement

11 / 20 / 2008

Amount of Each Disbursement this Period

700.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Aristotle International, INC

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Renewal of Contract; Electronic Filing Software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: B3D5CB2D5C2AF4600901

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

AT&T Illinois

Mailing Address POB 8100

City Aurora State IL Zip Code 60507

Purpose of Disbursement  
Landline Phones

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: B7303F14EB7154050A40

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

534.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

3234.75

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

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

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

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

AT&T Illinois

Mailing Address POB 8100

City

Aurora

State

IL

Zip Code

60507

Purpose of Disbursement

Land Line Phones

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: B87421BAA2DF641FBB31

Date of Disbursement

11 / 10 / 2008

Amount of Each Disbursement this Period

577.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

AT&T Mobility

Mailing Address PO BOX 6428

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

Cell Phone Service

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: BFE31F414D02A41FDA37

Date of Disbursement

11 / 10 / 2008

Amount of Each Disbursement this Period

910.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

AT&T Mobility

Mailing Address PO BOX 6428

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

Cell Phone Service

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: B7C06F2F628614B1F966

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

755.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2243.78

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

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

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

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address PO BOX 6428

City State Zip Code  
Carol Stream IL 60197

Purpose of Disbursement  
Cell Phone Service  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: B7BA5FD4DB53747E2B95  
Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

361.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address PO BOX 6428

City State Zip Code  
Carol Stream IL 60197

Purpose of Disbursement  
Cell Phone Service  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: B408FDECA53404C3DA11  
Date of Disbursement

10 / 11 / 2008

Amount of Each Disbursement this Period

925.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
AT&T Teleconference Services

Mailing Address PO Box 2840

City State Zip Code  
Omaha NE 68103-2840

Purpose of Disbursement  
Teleconference services  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: B04F6C478284F4E029B8  
Date of Disbursement

11 / 20 / 2008

Amount of Each Disbursement this Period

56.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

56.10

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



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

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

FOR LINE NUMBER:  
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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Baymont

Mailing Address 5871 S. 6th St.

City  
Springfield

State  
IL

Zip Code  
62703-5193

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: B2412082279364888A2A

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

89.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Baymont

Mailing Address 5871 S. 6th St.

City  
Springfield

State  
IL

Zip Code  
62703-5193

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: BC80202FB3CF44033817

Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

89.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Buffalo Wild Wings

Mailing Address 207 E. Roosevelt Rd.

City  
Lombard

State  
IL

Zip Code  
60148-4555

Purpose of Disbursement  
Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: B1C04BE9A1D764E4FA38

Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

68.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Buffalo Wild Wings	<b>Transaction ID:</b> B62380DE08F30451E88C <b>Date of Disbursement</b>
<b>Mailing Address</b> 207 E. Roosevelt Rd.	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>09 / 25 / 2008</div>
<b>City</b> Lombard <b>State</b> IL <b>Zip Code</b> 60148-4555	<b>Amount of Each Disbursement this Period</b>
<b>Purpose of Disbursement</b> Refreshments	<div> <div>Amount</div> <div>51.66</div> </div>
<b>Candidate Name</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>Disbursement For:</b> 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>State:</b> <b>District:</b>	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Buffalo Wild Wings	<b>Transaction ID:</b> BAA08164977364BAC96F <b>Date of Disbursement</b>
<b>Mailing Address</b> 207 E. Roosevelt Rd.	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 10 / 2008</div>
<b>City</b> Lombard <b>State</b> IL <b>Zip Code</b> 60148-4555	<b>Amount of Each Disbursement this Period</b>
<b>Purpose of Disbursement</b> Refreshments	<div> <div>Amount</div> <div>66.00</div> </div>
<b>Candidate Name</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>Disbursement For:</b> 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>State:</b> <b>District:</b>	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Butterfield Country Club	<b>Transaction ID:</b> B7AA45FFD9EED4714860 <b>Date of Disbursement</b>
<b>Mailing Address</b> 2800 Midwest Rd.	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 16 / 2008</div>
<b>City</b> Oak Brook <b>State</b> IL <b>Zip Code</b> 60523-1603	<b>Amount of Each Disbursement this Period</b>
<b>Purpose of Disbursement</b> Event cost (food)	<div> <div>Amount</div> <div>436.75</div> </div>
<b>Candidate Name</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>Disbursement For:</b> 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>State:</b> <b>District:</b>	<div> <div>Category/Type</div> </div>
<b>SUBTOTAL of Disbursements This Page (optional)</b>	<div> <div>Amount</div> <div>436.75</div> </div>
<b>TOTAL This Period (last page this line number only)</b>	<div> <div>Amount</div> </div>

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<b>A.</b>	Full Name (Last, First, Middle Initial) Campaign General	Transaction ID: B559688388ED54D66BD7
	Mailing Address	Date of Disbursement 11 / 03 / 2008
	City Beaufort	State NC
	Zip Code 28516	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement Ad production and robo calls	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) CapSouthDC Consulting	Transaction ID: BB37CC5E4E38248EBBE0
	Mailing Address 2449 P St. NW #3	Date of Disbursement 11 / 24 / 2008
	City Washington	State DC
	Zip Code 20007	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Communications Management	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Claim Jumper	Transaction ID: BACA25ACA75A04E96A60
	Mailing Address 92 Yorktown Center	Date of Disbursement 09 / 29 / 2008
	City Lombard	State IL
	Zip Code 60148-5529	Amount of Each Disbursement this Period 114.46
	Purpose of Disbursement Refreshments	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
SUBTOTAL of Disbursements This Page (optional) .....		11000.00
TOTAL This Period (last page this line number only) .....		

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774198

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Comcast Spotlight

Mailing Address 8745 W. Higgins Rd.  
Suite 400

City Chicago State IL Zip Code 60631-2750

Purpose of Disbursement  
TV Advertising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: BDBFED753C527445BAAD

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

47005.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Costco.com

Mailing Address PO Box 34331

City Seattle State WA Zip Code 98124-1331

Purpose of Disbursement  
Office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: B465CB95BA9F24CD3A26

Date of Disbursement

09 / 20 / 2008

Amount of Each Disbursement this Period

240.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Exxon Mobil

Mailing Address 435 W Roosevelt Rd

City Lombard State IL Zip Code 60148-4224

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: BD810DBCEB3BB4017B81

Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

31.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

47005.00

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City State Zip Code  
Memphis TN 38116

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: BBE40BEAA29E84B18A4E

Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

7.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City State Zip Code  
Memphis TN 38116

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: BCB574B4F48654D199D5

Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

9.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City State Zip Code  
Memphis TN 38116

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B7FDD734970564242987

Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

8.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B01BAB73E2DF74DB6844</p> <p>Date of Disbursement 09 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 18.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BB0DCE1E57715460B9CE</p> <p>Date of Disbursement 09 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 18.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2AC999AFB18E4E8DB1C</p> <p>Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 23.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774201

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City Memphis State TN Zip Code 38116

Purpose of Disbursement

Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B20E4090D63AD430CAE1

Date of Disbursement

10 / 05 / 2008

Amount of Each Disbursement this Period

21.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City Memphis State TN Zip Code 38116

Purpose of Disbursement

Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B9377F40836AA4B50B53

Date of Disbursement

10 / 08 / 2008

Amount of Each Disbursement this Period

21.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Fed Ex Shipping

Mailing Address 3875 Airways, Module H3

City Memphis State TN Zip Code 38116

Purpose of Disbursement

Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B6D04C37A98694295A90

Date of Disbursement

10 / 08 / 2008

Amount of Each Disbursement this Period

6.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BAEA89E7548D040E8883</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 20.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BDA77B285B81C4FDFB8F</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 40.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fed Ex Shipping</p> <p>Mailing Address 3875 Airways, Module H3</p> <p>City Memphis State TN Zip Code 38116</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B474F3EB8B4AF46EA83D</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 36.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	



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

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Fornaro/Francioso

Mailing Address 4569 S. Broad St.

City  
Hamilton

State  
NJ

Zip Code  
08620

Purpose of Disbursement

Election Attorney

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: B2642C319247D4460A5D

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

10156.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Harry Caray's

Mailing Address 70 Yorktown Center

City  
Lombard

State  
IL

Zip Code  
60148-5529

Purpose of Disbursement

Event cost (food and drink)

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: BB43540ECA6A34164A6C

Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

2925.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Hinckley Springs

Mailing Address PO BOX 660579

City  
Dallas

State  
TX

Zip Code  
75266-0579

Purpose of Disbursement

Water

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: B20C91CDF7FA34A529E0

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

32.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13113.67

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b>		Full Name (Last, First, Middle Initial) Hinckley Springs		Transaction ID: BB3B319EC78864BDB875 Date of Disbursement 11 / 20 / 2008	
Mailing Address		PO BOX 660579		Amount of Each Disbursement this Period 76.00	
City Dallas		State TX		Zip Code 75266-0579	
Purpose of Disbursement Water		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
<b>B.</b>		Full Name (Last, First, Middle Initial) Hotels.com		Transaction ID: B8EC2BF23926D4D6DB99 Date of Disbursement 09 / 30 / 2008	
Mailing Address		10440 North Central Expressway, Su		Amount of Each Disbursement this Period 159.10	
City Dallas		State TX		Zip Code 75231-2228	
Purpose of Disbursement Lodging- Hampton Inn (Oakbrook Terrace, IL)		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:				[MEMO ITEM]	
<b>C.</b>		Full Name (Last, First, Middle Initial) Hotels.com		Transaction ID: B79BD9F0B32BE484F99C Date of Disbursement 10 / 07 / 2008	
Mailing Address		10440 North Central Expressway, Su		Amount of Each Disbursement this Period 159.10	
City Dallas		State TX		Zip Code 75231-2228	
Purpose of Disbursement Lodging-Hampton Inn (Oakbrook Terrace, IL)		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:				[MEMO ITEM]	
SUBTOTAL of Disbursements This Page (optional) .....				76.00	
TOTAL This Period (last page this line number only) .....					

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774205

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kelm Scott Press</p> <p>Mailing Address 1665 Mallette Rd.</p> <p>City Aurora State IL Zip Code 60505</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4D2E226A259B46A99A3</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 3653.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mobil</p> <p>Mailing Address 504 N. Crego</p> <p>City DeKalb State IL Zip Code 60115</p> <p>Purpose of Disbursement Travel expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2BC3212A36D5487E88E</p> <p>Date of Disbursement 10 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 27.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mobil</p> <p>Mailing Address 504 N. Crego</p> <p>City DeKalb State IL Zip Code 60115</p> <p>Purpose of Disbursement Travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9FE4178642474460BD2</p> <p>Date of Disbursement 10 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 49.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶ 3653.00</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774206

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mobil

Mailing Address 504 N. Crego

City  
DeKalb

State  
IL

Zip Code  
60115

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B8A5FBDD9B04F4783AC8

Date of Disbursement

10 / 09 / 2008

Amount of Each Disbursement this Period

49.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Mobil

Mailing Address 504 N. Crego

City  
DeKalb

State  
IL

Zip Code  
60115

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B995374131C4240B5A83

Date of Disbursement

10 / 09 / 2008

Amount of Each Disbursement this Period

11.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Mobil

Mailing Address 2150 S. Highland Ave.

City  
Lombard

State  
IL

Zip Code  
60148-5309

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B48C22C5AE47648CFA37

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

59.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<b>A.</b>	Full Name (Last, First, Middle Initial) Mobil	Transaction ID: B45CC872048F142998B8 Date of Disbursement MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 2150 S. Highland Ave.	
	City Lombard State IL Zip Code 60148-5309	Amount of Each Disbursement this Period 33.99
	Purpose of Disbursement Travel expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Novatoo Audio Visual	Transaction ID: B2D2DC2E3043C410ABDF Date of Disbursement MM / DD / YYYY 11 / 07 / 2008
	Mailing Address 120 Easy St., Suite 3	
	City Carol Stream State IL Zip Code 60188	Amount of Each Disbursement this Period 922.00
	Purpose of Disbursement Audio Visual Equipment Rental	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Novatoo Audio Visual	Transaction ID: BD19954EC7CBC41EB9DE Date of Disbursement MM / DD / YYYY 09 / 25 / 2008
	Mailing Address 120 Easy St., Suite 3	
	City Carol Stream State IL Zip Code 60188	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Equipment rental	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
	State: District:	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		922.00
<b>TOTAL</b> This Period (last page this line number only) .....		

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774208

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 511 E. Roosevelt Rd.

City Lombard State IL Zip Code 60148-4631

Purpose of Disbursement  
Office supplies  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B87EEB43BF082401D9C9  
Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

330.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 511 E. Roosevelt Rd.

City Lombard State IL Zip Code 60148-4631

Purpose of Disbursement  
Office supplies  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B7E72659EED044AE48AB  
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

42.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 511 E. Roosevelt Rd.

City Lombard State IL Zip Code 60148-4631

Purpose of Disbursement  
Office supplies  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: BF28F0514A61241EB864  
Date of Disbursement

10 / 13 / 2008

Amount of Each Disbursement this Period

95.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

**A.**

Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address 511 E. Roosevelt Rd.

City  
Lombard

State  
IL

Zip Code  
60148-4631

Purpose of Disbursement

Office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: BFA5E47F868014449909

Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

36.79

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address 1020 N. Rohlwing Rd.

City  
Addison

State  
IL

Zip Code  
60101-1034

Purpose of Disbursement

Office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: B73661776904542219D7

Date of Disbursement

10 / 19 / 2008

Amount of Each Disbursement this Period

216.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Quantum Digital

Mailing Address 636 Commerce Dr

City  
Hudson

State  
WI

Zip Code  
54016-8177

Purpose of Disbursement

Paper

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: B5182F623EBDA4FE8923

Date of Disbursement

10 / 09 / 2008

Amount of Each Disbursement this Period

181.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Quincy Country Club

Mailing Address 2410 State Street

City State Zip Code  
Quincy IL 62301-5708

Purpose of Disbursement

Event cost (food)

Candidate Name

Category/  
Type

Office Sought: ☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Transaction ID: B144FF5DC748E4FB0B07

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

293.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Rock Bottom

Mailing Address 94 Yorktown Center

City State Zip Code  
Lombard IL 60148-5529

Purpose of Disbursement

Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Transaction ID: B026BDEDD05A7459EAD1

Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

81.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Rock Bottom

Mailing Address 94 Yorktown Center

City State Zip Code  
Lombard IL 60148-5529

Purpose of Disbursement

Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House

☐ Senate

☐ President

State:

District:

Disbursement For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Transaction ID: B3BDAD8C140644E61A15

Date of Disbursement

10 / 07 / 2008

Amount of Each Disbursement this Period

157.41

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

293.68

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



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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Rock Bottom

Mailing Address 94 Yorktown Center

City Lombard State IL Zip Code 60148-5529

Purpose of Disbursement

Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: B54A726BE39B34CD080A

Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

65.93

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Rock Bottom

Mailing Address 94 Yorktown Center

City Lombard State IL Zip Code 60148-5529

Purpose of Disbursement

Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: B6F3D98617D7D4797957

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

20.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Rock Bottom

Mailing Address 94 Yorktown Center

City Lombard State IL Zip Code 60148-5529

Purpose of Disbursement

Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: BBC3B235226974571994

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

132.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
 Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Speed Lane		<b>Transaction ID:</b> B942492FB5B864C2C9A5 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 8	
Mailing Address 1422 W. 55th St.		<b>Amount of Each Disbursement this Period</b> 47.19	
City Countryside State IL Zip Code 60525-6542	Purpose of Disbursement Travel expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>	
Category/Type			

<b>B.</b> Full Name (Last, First, Middle Initial) Stahelin Partners		<b>Transaction ID:</b> BC36A718BF2464DB1B3C <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
Mailing Address 800 Roosevelt Rd. Bldg. A, Suite 100		<b>Amount of Each Disbursement this Period</b> 2372.00	
City Glen Ellyn State IL Zip Code 60137	Purpose of Disbursement November Rent	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>	
Category/Type			

<b>C.</b> Full Name (Last, First, Middle Initial) Staples		<b>Transaction ID:</b> B4C8E81C5464A4BEAB59 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8	
Mailing Address 7199 S. Kingery Highway		<b>Amount of Each Disbursement this Period</b> 71.80	
City Willowbrook State IL Zip Code 60527-5525	Purpose of Disbursement Supplies for mailing	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>	
Category/Type			

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

2372.00

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

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

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

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 7199 S. Kingery Highway</p> <p>City Willowbrook State IL Zip Code 60527-5525</p> <p>Purpose of Disbursement Mailing supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B000F64096778488C87E</p> <p>Date of Disbursement MM / DD / YYYY 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 75.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 7199 S. Kingery Highway</p> <p>City Willowbrook State IL Zip Code 60527-5525</p> <p>Purpose of Disbursement Mailing supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE9BF6D859D994D499C8</p> <p>Date of Disbursement MM / DD / YYYY 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 57.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thortons</p> <p>Mailing Address 250 E. ROOSEVELT RD.</p> <p>City Villa Park State IL Zip Code 60181-3508</p> <p>Purpose of Disbursement Travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B58FCC22544E94676836</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 60.49</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774214

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: BBA41543681144A23AEC  
Date of Disbursement

09 / 22 / 2008

Amount of Each Disbursement this Period

423.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 380 E. St. Charles Rd.

City Lombard State IL Zip Code 60148-2375

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: BEA9C1E3DA3E64DA5AD6  
Date of Disbursement

09 / 16 / 2008

Amount of Each Disbursement this Period

9.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 380 E. St. Charles Rd.

City Lombard State IL Zip Code 60148-2375

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:

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

Transaction ID: B740CAF4539BE474FBC4  
Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

254.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 226 Yorktown Center</p> <p>City Lombard State IL Zip Code 60148-5534</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1FAB967F7DD040BDB53</p> <p>Date of Disbursement MM / DD / YYYY 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 210.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 380 E. St. Charles Rd.</p> <p>City Lombard State IL Zip Code 60148-2375</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC012CFE022C641588DC</p> <p>Date of Disbursement MM / DD / YYYY 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 380 E. St. Charles Rd.</p> <p>City Lombard State IL Zip Code 60148-2375</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B73A355877D384ED18A9</p> <p>Date of Disbursement MM / DD / YYYY 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 336.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774216

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 380 E. St. Charles Rd.</p> <p>City Lombard State IL Zip Code 60148-2375</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B7658EA42084B40FDA5E</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 14.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 380 E. St. Charles Rd.</p> <p>City Lombard State IL Zip Code 60148-2375</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2B8ED93B2C374FB5B3E</p> <p>Date of Disbursement MM / DD / YYYY 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 336.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 312 Park Ave.</p> <p>City Clarendon Hills State IL Zip Code 60514-1355</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B8CCF25F31AA243E7991</p> <p>Date of Disbursement MM / DD / YYYY 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 420.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774217

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

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

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NAME OF COMMITTEE (In Full)  
 Sauerberg for US Senate

<b>A.</b> Full Name (Last, First, Middle Initial) United States Postal Service	<b>Transaction ID:</b> BF91055500E614585989 <b>Date of Disbursement</b>
Mailing Address 312 Park Ave.	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>11</div> <div>24</div> <div>2008</div> </div>
City State Zip Code Clarendon Hills IL 60514-1355	<b>Amount of Each Disbursement this Period</b> <div>11.80</div>
Purpose of Disbursement Postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> BA086708F9F5C4200AEA <b>Date of Disbursement</b>
Mailing Address PO Box 25505	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>11</div> <div>07</div> <div>2008</div> </div>
City State Zip Code Lehigh Valley PA 18002-5505	<b>Amount of Each Disbursement this Period</b> <div>322.18</div>
Purpose of Disbursement Cell Phone Service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Washington Mututal Business Card	<b>Transaction ID:</b> BFF2A3F3F173E42F89C8 <b>Date of Disbursement</b>
Mailing Address PO Box 660487	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>10</div> <div>17</div> <div>2008</div> </div>
City State Zip Code Dallas TX 75266-0487	<b>Amount of Each Disbursement this Period</b> <div>1583.84</div>
Purpose of Disbursement Credit Card Bill	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>1906.02</div>
<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

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(check only one)

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NAME OF COMMITTEE (In Full)  
 Sauerberg for US Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial)            Washington Mututal Business Card</p> <p>Mailing Address PO Box 660487</p> <p>City Dallas State TX Zip Code 75266-0487</p> <p>Purpose of Disbursement            Credit Card Bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BC262FE41F4BE4225BB8</p> <p>Date of Disbursement            11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period            12051.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial)            Teresa M. Belmonte</p> <p>Mailing Address 824 Brentwood Drive</p> <p>City Bensenville State IL Zip Code 60106-3209</p> <p>Purpose of Disbursement            Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B60B993E6FA2147909F6</p> <p>Date of Disbursement            10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period            1300.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial)            Teresa M. Belmonte</p> <p>Mailing Address 824 Brentwood Drive</p> <p>City Bensenville State IL Zip Code 60106-3209</p> <p>Purpose of Disbursement            Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BC144D0291CDB40099C4</p> <p>Date of Disbursement            11 / 14 / 2008</p> <p>Amount of Each Disbursement this Period            1300.13</p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ▶ 14652.12</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774219



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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Teresa M. Belmonte

Mailing Address 824 Brentwood Drive

City Bensenville

State IL

Zip Code 60106-3209

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: B7AE1C4E3279D4C18919

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

5551.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Christopher L. Hage

Mailing Address 139 W Park Ave

City Wheaton

State IL

Zip Code 60187-6459

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: BFC6F99CA14DA463494F

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1762.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Christopher L. Hage

Mailing Address 139 W Park Ave

City Wheaton

State IL

Zip Code 60187-6459

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: B6BFB6555CC8F4709AF5

Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

1762.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9075.74

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Christopher L. Hage

Mailing Address 139 W Park Ave

City  
Wheaton

State  
IL

Zip Code  
60187-6459

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: BF5E4AA1C371742E28B1

Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

1762.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Christopher L. Hage

Mailing Address 139 W Park Ave

City  
Wheaton

State  
IL

Zip Code  
60187-6459

Purpose of Disbursement  
Travel expense reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B7C8A23E0F95045F3A74

Date of Disbursement

11 / 07 / 2008

Amount of Each Disbursement this Period

569.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Christopher L. Hage

Mailing Address 139 W Park Ave

City  
Wheaton

State  
IL

Zip Code  
60187-6459

Purpose of Disbursement  
Travel and office expense reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

Transaction ID: B65A6BD9CB0B6465AB25

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

133.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2465.92

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

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

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Evan Kreiner	Transaction ID: B28CA930BAC3A41E2ABD Date of Disbursement 10 / 31 / 2008
	Mailing Address 19 Edge Hill Court	
	City Woodcliff Lake State NJ Zip Code 07677-7913	Amount of Each Disbursement this Period 1480.30
	Purpose of Disbursement Payroll	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. Thomas C Liske	Transaction ID: B0D1E4567458B40C5BF1 Date of Disbursement 10 / 21 / 2008
	Mailing Address 79 N Royal Oaks Dr	
	City Bristol State IL Zip Code 60512-9700	Amount of Each Disbursement this Period 164.52
	Purpose of Disbursement In-kind: Food and drink for event	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Arman Moseni	Transaction ID: B6D371D8B0814498B9A1 Date of Disbursement 10 / 30 / 2008
	Mailing Address 12010 South Paulina	
	City Calumet Park State IL Zip Code 60827-5318	Amount of Each Disbursement this Period 650.00
	Purpose of Disbursement In-kind: Food and drink for event	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
	State: District:	
SUBTOTAL of Disbursements This Page (optional) .....		2294.82
TOTAL This Period (last page this line number only) .....		

FE5AN018

FEC Schedule B ( Form 3 ) (Revised 02/2003)

28020774222

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A. Full Name (Last, First, Middle Initial)  
Mr. Terry Peshia

Mailing Address 467 Maine St.

City Oswego State IL Zip Code 60543-9048

Purpose of Disbursement  
In-kind: Food and drink for event

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: B000BCE160D784097BE0  
Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

164.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)  
Nancy F Sauerberg

Mailing Address 6330 Wesley Rd

City Willowbrook State IL Zip Code 60527-5480

Purpose of Disbursement  
Reimbursement for postage/mailling supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: BEFF1CD47F2234B6CA97  
Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

636.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

Mailing Address 3 Elm Creek Dr. Apt. 102

City Elmhurst State IL Zip Code 60126-5288

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: B00BD453E3A46448E8F7  
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

924.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1725.78

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

<b>A.</b>		Full Name (Last, First, Middle Initial) Neal Sauerberg		Transaction ID: BDFDE80E7F95242F4A04 Date of Disbursement 11 / 14 / 2008	
Mailing Address		3 Elm Creek Dr. Apt. 102		Amount of Each Disbursement this Period 924.70	
City Elmhurst		State IL		Zip Code 60126-5288	
Purpose of Disbursement Payroll		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
<b>B.</b>		Full Name (Last, First, Middle Initial) Lynne Senne		Transaction ID: B53EC204271E84C09ABA Date of Disbursement 10 / 31 / 2008	
Mailing Address		1210 BEECHTREE LANE		Amount of Each Disbursement this Period 980.46	
City Bartlett		State IL		Zip Code 60103-5740	
Purpose of Disbursement Payroll		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
<b>C.</b>		Full Name (Last, First, Middle Initial) Lynne Senne		Transaction ID: B1ACB47460421445A87B Date of Disbursement 11 / 14 / 2008	
Mailing Address		1210 BEECHTREE LANE		Amount of Each Disbursement this Period 980.47	
City Bartlett		State IL		Zip Code 60103-5740	
Purpose of Disbursement Payroll		Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:					
SUBTOTAL of Disbursements This Page (optional) .....				2885.63	
TOTAL This Period (last page this line number only) .....					

28020774224

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Mr. Roger Sheeman

Transaction ID: B95887662346B46F7985

Date of Disbursement

10 / 31 / 2008

Mailing Address 1719 Tamahawk In.

City Naperville State IL Zip Code 60564-8921

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

223.37

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

B.

Full Name (Last, First, Middle Initial)

Mr. Roger Sheeman

Transaction ID: B8DB0D9D112E646B4AA0

Date of Disbursement

11 / 14 / 2008

Mailing Address 1719 Tamahawk In.

City Naperville State IL Zip Code 60564-8921

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

223.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

C.

Full Name (Last, First, Middle Initial)

Mr. Roger Sheeman

Transaction ID: BE6DF58049ED34BB5923

Date of Disbursement

10 / 16 / 2008

Mailing Address 1719 Tamahawk In.

City Naperville State IL Zip Code 60564-8921

Purpose of Disbursement

Travel expense reimbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

27.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

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

SUBTOTAL of Disbursements This Page (optional) ▶

474.67

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

119887.43

**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 94 / 104

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

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NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

A.

Full Name (Last, First, Middle Initial)

Dr. Daniel J. Campbell

Mailing Address 6120 S Grant Ave

City  
Burr Ridge

State  
IL

Zip Code  
60527-5143

Purpose of Disbursement

Refund

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: BC37602C36B4D43E8A54

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2008

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

600.00

# SCHEDULE C (FEC Form 3)

## LOANS

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

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FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C1B3483F458594E1EB59

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

200000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
06

DD  
28

YYYY  
2007

On Demand

None

% (apr)

☐ Yes

☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional) .....

200000.00

**TOTALS** This Period (last page in this line only) .....

.00

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



# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 96 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: CD37F043B6C1748FDB17

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

29000.00

0.00

29000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
06

DD  
29

YYYY  
2007

On Demand

None % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) .....

29000.00

TOTALS This Period (last page in this line only) .....

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 97 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: CFDB366C5062B40D2B76

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
01

DD  
29

YYYY  
2008

On Demand

None

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

50000.00

TOTALS This Period (last page in this line only) ▶

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 98 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Sauerberg for US Senate

Transaction ID: CB80459EF9E9B4B9BE2C

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. Steven Sauerberg, MD

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

87520.35

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

87520.35

### TERMS

Date Incurred

MM  
03

DD  
19

YYYY  
2008

Date Due

On Demand

Interest Rate

None

% (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

87520.35

TOTALS This Period (last page in this line only) ▶

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 99 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C1CB99059207F4C45A44

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
05

DD  
01

YYYYYY  
2007

On Demand

None

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) .....

10000.00

TOTALS This Period (last page in this line only) .....

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 100 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C028C9A0529BE4723AE5

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

40856.15

0.00

40856.15

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3

D D  
2 1

Y Y Y Y  
2 0 0 8

On Demand

None % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

40856.15

TOTALS This Period (last page in this line only) ▶

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

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FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C36115EC8F0A7464CA54

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

535669.20

0.00

535669.20

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
03

DD  
28

YYYY  
2008

On Demand

None

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

535669.20

TOTALS This Period (last page in this line only) ▶

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

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FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C48C43333AD7A42E983A

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

350000.00

0.00

350000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
03

DD  
18

YYYY  
2008

On Demand

None

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

350000.00

TOTALS This Period (last page in this line only) ▶

.00

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

# SCHEDULE C (FEC Form 3)

## LOANS

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

PAGE 103 / 104

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
Sauerberg for US Senate

Transaction ID: C81528877EF1A4104AB8

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Dr. Steven Sauerberg, MD

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM  
06

DD  
19

YYYY  
2007

On Demand

None

% (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional) .....

10000.00

**TOTALS** This Period (last page in this line only) .....

1313045.70

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



28020774236



# Express



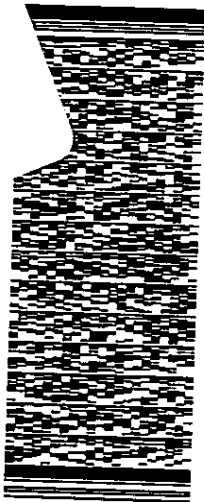
Do not mark through any previous

From: Origin ID: DPAA (630) 640-9597  
Teresa Belmonte  
Sauerberg for U.S. Senate  
311 S. County Farm Rd. Suite 1  
Winneton, IL 60187



SHIP TO: (202) 224-0758 BILL SENDER

Office of Public Records  
United States Senate  
232 Hart Senate Office Building  
Washington, DC 20510



RT 702 3420  
0 12.03  
FZ

After printing this label:

Ship Date: 02DEC08  
ActWgt: 1.0 LB  
CAD: 4074039ANET8091  
Account#: S

Delivery Address Bar Code



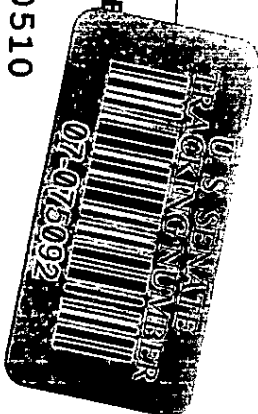
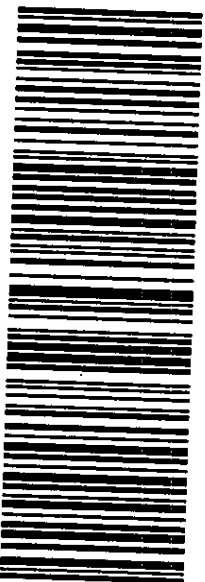
Ref #  
Invoice #  
PO #  
Dept #

TRK# 7961 5378 3420  
0201

WED - 03DEC  
PRIORITY OVER  
DSR

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# United States Senate

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THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

12-02-08



UPS

\_\_\_\_\_



DHL

\_\_\_\_\_



AIRBORNE EXPRESS

\_\_\_\_\_



RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

12-05-08

28020774238

28020774239

