

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.

12FE4M5

Friends of John Tree, Inc.

ADDRESS (number and street) 318 West Half Day Road

Suite 309

Check if different than previously reported. (ACC)

Buffalo Grove

IL

60089

2. **FEC IDENTIFICATION NUMBER**

C C00505875

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

IL

10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on / / in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Dahlia M. Ronen

Signature of Treasurer Dahlia M. Ronen

[Electronically Filed]

Date

/ /

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								
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of John Tree, Inc.

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	12031.50	111170.45
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	12031.50	111170.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19187.13	116317.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	200.00	200.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	18987.13	116117.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	53.41	
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).....	17955.75	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of John Tree, Inc.

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9417.50	94048.45
(ii) Unitemized.....	2114.00	10172.00
(iii) TOTAL of contributions from individuals ▶	11531.50	104220.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	4000.00
(d) The Candidate.....	0.00	2950.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12031.50	111170.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	33000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	33000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	200.00	200.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	12231.50	144370.45

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19187.13	116317.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	28000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	28000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	19187.13	144317.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7009.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12231.50
25. SUBTOTAL (add Line 23 and Line 24).....	19240.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19187.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	53.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Friends of John Tree, Inc.

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

Mailing Address 12 Executive Ct

City South Barrington State IL Zip Code 60010-9538

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

Name of Employer Presence Marketing Occupation Executive Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2012

Transaction ID : C7980959

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 13 Cragmere Rd

City Suffern State NY Zip Code 10901

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

Name of Employer HMS Productions Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2012

Transaction ID : C7983033

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Lewis M Branscomb

Mailing Address 1600 Ludington Lane

City La Jolla State CA Zip Code 92037

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

Name of Employer retired Occupation professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2012

Transaction ID : C7984375

Amount of Each Receipt this Period
 100.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

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

Mailing Address 4241 North Sand Rd

City: Hershey State: NE Zip Code: 69143

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

Name of Employer: None Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 10 / 2012

Transaction ID : C7983032

Amount of Each Receipt this Period: 250.00

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

Mailing Address 70 Lippincott Rd

City: Fox Lake State: IL Zip Code: 60020-1216

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

Name of Employer: NBGCPA, LTD Occupation: CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1067.50

Date of Receipt: 03 / 06 / 2012

Transaction ID : C8006544

Amount of Each Receipt this Period: 617.50

* In-Kind: Yard Signs

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

Mailing Address 2966 Stonegate Ln

City: Northbrook State: IL Zip Code: 60062-4341

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

Name of Employer: N/A Occupation: retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 03 / 08 / 2012

Transaction ID : C7981996

Amount of Each Receipt this Period: 1000.00

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

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

1867.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

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

Mailing Address 910 Park Ave

City State Zip Code
New York NY 10075-0255

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

Name of Employer Occupation
N/A retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2012

Transaction ID : C7980829

Amount of Each Receipt this Period
700.00

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

Mailing Address 2800 LaSalle Plaza
800 LaSalle Ave

City State Zip Code
Minneapolis MN 55402

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

Name of Employer Occupation
Robins, Kaplan, Miller & Ciresi Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : C8005180

Amount of Each Receipt this Period
500.00

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

Mailing Address 1175 Pelham Rd

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
None Activist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2012

Transaction ID : C7979704

Amount of Each Receipt this Period
1500.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

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

Mailing Address 484 Rockefeller Rd

City Lake Forest State IL Zip Code 60045

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

Name of Employer none Occupation not employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2012

Transaction ID : C7981726

Amount of Each Receipt this Period
 2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

9417.50

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

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

FOR LINE NUMBER: PAGE 9 OF 28
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

A. Full Name (Last, First, Middle Initial)
Robins Kaplan PAC

Mailing Address 2800 La Salle Plaza

City State Zip Code
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C** C00275909

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2012

Transaction ID : C8005212

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Nicholas Burke		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 70 Lippincott Rd		Amount of Each Disbursement this Period 617.50 Transaction ID : D379881
City Fox Lake	State IL	
Zip Code 60020-1216	Purpose of Disbursement Yard Signs	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 5565 Glenridge Connector, NE		Amount of Each Disbursement this Period 8.00 Transaction ID : D383030
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 5565 Glenridge Connector, NE		Amount of Each Disbursement this Period 72.92 Transaction ID : D383031
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	698.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 5565 Glenridge Connector, NE		Amount of Each Disbursement this Period 134.40 Transaction ID : D383033
City Atlanta State GA Zip Code 30342	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Robert P. Goldstein		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 301 Massachusetts Avenue NW		Amount of Each Disbursement this Period 1426.00 Transaction ID : D380772
City Washington State DC Zip Code 20001	Purpose of Disbursement Fundraising Consultant	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grant Herring		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 204 E. St James St, Apt 204		Amount of Each Disbursement this Period 1735.69 Transaction ID : D378608
City Arlington Heights State IL Zip Code 60004	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3296.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 28	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

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

Mailing Address 204 E. St James St, Apt 204

City State Zip Code
Arlington Heights IL 60004

Purpose of Disbursement
Payroll

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 16 / 2012

Amount of Each Disbursement this Period
1735.68

Transaction ID : D380754

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

Mailing Address 204 E. St James St, Apt 204

City State Zip Code
Arlington Heights IL 60004

Purpose of Disbursement
Payroll

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 30 / 2012

Amount of Each Disbursement this Period
1058.08

Transaction ID : D380755

Full Name (Last, First, Middle Initial)
c. Laschen Community Center

Mailing Address 294 Evergreen Drive

City State Zip Code
Vernon Hills IL 60061

Purpose of Disbursement
Fundraising Event Room Rental

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 16 / 2012

Amount of Each Disbursement this Period
400.00

Transaction ID : D380775

SUBTOTAL of Disbursements This Page (optional)..... 3193.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012		
Mailing Address 1101 15th Street NW			Amount of Each Disbursement this Period 624.81		
City Washington	State DC	Zip Code 20005	Transaction ID : D383749		
Purpose of Disbursement Voter File		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012		
Mailing Address 501 Wampanoag Trl			Amount of Each Disbursement this Period 1724.80		
City Riverside	State RI	Zip Code 02915	Transaction ID : D380747		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012		
Mailing Address 501 Wampanoag Trl			Amount of Each Disbursement this Period 49.00		
City Riverside	State RI	Zip Code 02915	Transaction ID : D380748		
Purpose of Disbursement Payroll Service Fee		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	2398.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 1605.67
City Riverside	State RI	
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Transaction ID : D380749	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 49.00
City Riverside	State RI	
Purpose of Disbursement Payroll Service Fee	Category/ Type	
Candidate Name	Transaction ID : D380750	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 754.34
City Riverside	State RI	
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Transaction ID : D380751	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2409.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 49.00
City Riverside	State RI	
Zip Code 02915	Purpose of Disbursement Payroll Service Fee	Transaction ID : D380752
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PolPress		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 5566 North Northwest Highway		Amount of Each Disbursement this Period 250.00
City Chicago	State IL	
Zip Code 60630	Purpose of Disbursement Printing	Transaction ID : D380776
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stacy Raker		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 2616 N Clark St Apt 209		Amount of Each Disbursement this Period 1779.53
City Chicago	State IL	
Zip Code 60614-1531	Purpose of Disbursement Payroll	Transaction ID : D378612
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2078.53
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Stacy Raker		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 2616 N Clark St Apt 209		Amount of Each Disbursement this Period 1618.66
City Chicago	State IL Zip Code 60614-1531	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : D380764
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stacy Raker		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 2616 N Clark St Apt 209		Amount of Each Disbursement this Period 983.16
City Chicago	State IL Zip Code 60614-1531	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : D380765
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ben Seitelman		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 2873 Arlington Ave		Amount of Each Disbursement this Period 565.00
City Highland Park	State IL Zip Code 60035	
Purpose of Disbursement Intern Stipend	Category/Type	Transaction ID : D380777
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3166.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 991.60 Transaction ID : D380773
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Fundraising Travel	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address P.O Box 1037		Amount of Each Disbursement this Period 16.42 Transaction ID : D383035
City Folsom	State CA Zip Code 95763	
Purpose of Disbursement Mobile Phones	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address P.O Box 1037		Amount of Each Disbursement this Period 16.42 Transaction ID : D383037
City Folsom	State CA Zip Code 95763	
Purpose of Disbursement Mobile Phones	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1024.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address P.O Box 1037		Amount of Each Disbursement this Period 16.42
City Folsom	State CA	
Zip Code 95763	Purpose of Disbursement Mobile Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address P.O Box 1037		Amount of Each Disbursement this Period 16.42
City Folsom	State CA	
Zip Code 95763	Purpose of Disbursement Mobile Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. Wheeling Township Democrats		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 1310 W Northwest Hwy # A		Amount of Each Disbursement this Period 250.00
City Arlington Heights	State IL	
Zip Code 60004	Purpose of Disbursement Contributions	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	282.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

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

Mailing Address 204 E. St James St, Apt 204

City State Zip Code
Arlington Heights IL 60004

Purpose of Disbursement
Reimbursement

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 21 / 2012

Amount of Each Disbursement this Period
199.46

Transaction ID : D380756

Category/Type

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

Mailing Address 201 South Waukegan Road

City State Zip Code
Lake Bluff IL 60044

Purpose of Disbursement
Postage

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 21 / 2012

Amount of Each Disbursement this Period
18.00

Transaction ID : D380759

[MEMO ITEM]

Category/Type

Full Name (Last, First, Middle Initial)
c. Dominicks

Mailing Address 201 South Waukegan Road

City State Zip Code
Lake Bluff IL 60044

Purpose of Disbursement
Postage

Candidate Name

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 21 / 2012

Amount of Each Disbursement this Period
27.00

Transaction ID : D380760

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 199.46

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : D380756

Reimbursement - see below if itemized

Form/Schedule:

Transaction ID:

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

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Dominicks		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 201 South Waukegan Road		Amount of Each Disbursement this Period 45.00
City Lake Bluff	State IL	
Zip Code 60044	Purpose of Disbursement Postage	Transaction ID : D380761
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Dominicks		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 201 South Waukegan Road		Amount of Each Disbursement this Period 27.00
City Lake Bluff	State IL	
Zip Code 60044	Purpose of Disbursement Postage	Transaction ID : D380762
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Stacy Raker		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 2616 N Clark St Apt 209		Amount of Each Disbursement this Period 114.07
City Chicago	State IL	
Zip Code 60614-1531	Purpose of Disbursement Reimbursement	Transaction ID : D380766
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	114.07
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : D380766

Reimbursement - see below if itemized

Form/Schedule:

Transaction ID:

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

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NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

Full Name (Last, First, Middle Initial) A. Dominicks		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 201 South Waukegan Road		Amount of Each Disbursement this Period 18.00
City Lake Bluff	State IL	
Zip Code 60044	Purpose of Disbursement Postage	Transaction ID : D380770
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Dominicks		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 201 South Waukegan Road		Amount of Each Disbursement this Period 14.93
City Lake Bluff	State IL	
Zip Code 60044	Purpose of Disbursement Office Supplies	Transaction ID : D380771
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	18862.05

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L759

Friends of John Tree, Inc.

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

[PERSONAL FUNDS]

Election: 2012

John Tree PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

4951 Trillium Trail

City

State

ZIP Code

Long Grove

IL

60047

Original Amount of Loan

7000.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M 12 / D 31 / Y 2011

Date Due

M / D / Y 12/31/2012

Interest Rate

0.00 % (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. 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)..... ▶

5000.00

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

5000.00

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

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

NAME OF COMMITTEE (In Full)
Friends of John Tree, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Finance Officers	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 118 North Main St	
City State Zip Code Providence RI 02903	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : D378262	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robert P. Goldstein	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 301 Massachusetts Avenue NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D385597	
Amount Incurred This Period 741.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 741.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robert P. Goldstein	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 301 Massachusetts Avenue NW	
City State Zip Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D385599	
Amount Incurred This Period 276.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 276.00

1) SUBTOTALS This Period This Page (optional)	4017.75
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	5000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5000.00

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

NAME OF COMMITTEE (In Full)

Friends of John Tree, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mandate Media		Nature of Debt (Purpose): Media Consulting
Mailing Address 2014 Southeast 39th St		
City	State	Zip Code
Portland	OR	97214

Outstanding Balance Beginning This Period	Transaction ID : D385600	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1600.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1600.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Strategy Group		Nature of Debt (Purpose): VAN Access Fee
Mailing Address 1603 Orrington Avenue Suite #1730		
City	State	Zip Code
Evanston	IL	60201

Outstanding Balance Beginning This Period	Transaction ID : D378857	
<input type="text" value="3500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Strategy Group		Nature of Debt (Purpose): Business Cards
Mailing Address 1603 Orrington Avenue Suite #1730		
City	State	Zip Code
Evanston	IL	60201

Outstanding Balance Beginning This Period	Transaction ID : D378858	
<input type="text" value="720.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="720.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5820.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="5000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5000.00"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Friends of John Tree, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group

Mailing Address 1603 Orrington Avenue
Suite #1730

City State Zip Code
Evanston IL 60201

Nature of Debt (Purpose):
Equipment Rental

Outstanding Balance Beginning This Period **Transaction ID : D378859**
120.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 120.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group

Mailing Address 1603 Orrington Avenue
Suite #1730

City State Zip Code
Evanston IL 60201

Nature of Debt (Purpose):
Lapel Stickers

Outstanding Balance Beginning This Period **Transaction ID : D378860**
815.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 815.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group

Mailing Address 1603 Orrington Avenue
Suite #1730

City State Zip Code
Evanston IL 60201

Nature of Debt (Purpose):
Petition Prep & Printing

Outstanding Balance Beginning This Period **Transaction ID : D378861**
183.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 183.00

1) SUBTOTALS This Period This Page (optional)	▶	1118.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	5000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		5000.00

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

NAME OF COMMITTEE (In Full)

Friends of John Tree, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group

Mailing Address 1603 Orrington Avenue
 Suite #1730

City State Zip Code
 Evanston IL 60201

Nature of Debt (Purpose):
 E-Mail Announcement

Outstanding Balance Beginning This Period	Transaction ID : D378862	
<input type="text" value="2000.00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
	Outstanding Balance at Close of This Period	<input type="text" value="2000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="12955.75"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="5000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="17955.75"/>