

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

ADDRESS (number and street) 50 SOUTH LASALLE STREET - M-9
 Check if different than previously reported. (ACC)
CHICAGO IL 60603

2. **FEC IDENTIFICATION NUMBER** C00024935
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2007 through 06 30 2007

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 Marek Dudek

Signature of Treasurer Electronically Filed by Marek Dudek Date 07 20 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		49290.53
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	49290.53									
(c) Total Receipts (from Line 19)	26430.00	26430.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75720.53	75720.53								
7. Total Disbursements (from Line 31)	18850.00	18850.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56870.53	56870.53								
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)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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**

Write or Type Committee Name
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15600.00	15600.00
(i) Itemized (use Schedule A)	10830.00	10830.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	26430.00	26430.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	26430.00	26430.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26430.00	26430.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26430.00	26430.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	14100.00	14100.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	4750.00	4750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18850.00	18850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18850.00	18850.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	26430.00	26430.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26430.00	26430.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Frederick Adams		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 3450 Bloomfield Club Dr.		Transaction ID: SA11A1.4658	
City Bloomfield	State MI	Zip Code 48301	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust Bk FSB	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Sherry S Barrat		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7	
Mailing Address 21 East Huron St #4601		Transaction ID: SA11A1.4660	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust Company	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Thomas Benzmilller		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 19F BOWENS LOOKOUT 13 BOWEN RD		Transaction ID: SA11A1.4661	
City Hong Kong	State ZZ	Zip Code	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Check	
Name of Employer The Northern Trust Co.	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Ali Bleecker		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1812 Wilmette Ave		Transaction ID: SA11A1.4663
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Northern Trust Investment- s., NA	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. David Blowers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 899 W. Deerpath		Transaction ID: SA11A1.4665
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Glenn Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 1808 Aberdeen Drive		Transaction ID: SA11A1.4667
City Glenview	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Phillip Delaney		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 1411 Kimlira Lane		Transaction ID: SA11A1.4669	
City State Zip Code Sarasota FL 34231	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust, NA	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Carlos Echave		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 2451 Brickell Ave #15-C		Transaction ID: SA11A1.4671	
City State Zip Code Miami FL 33129	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust, NA	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. David Hirshey		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 1133 N. Dearborn St.		Transaction ID: SA11A1.4673	
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust Company	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	1650.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

A. Full Name (Last, First, Middle Initial)
Douglas Klein

Mailing Address 312 Thornridge Ct. NW

City State Zip Code
Grand Rapids MI 49504

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

Name of Employer Northern Trust Bk FSB Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2007

Transaction ID: SA11A1.4675

Amount of Each Receipt this Period
250.00

Check

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

Mailing Address 994 Chadwick Ct.

City State Zip Code
Aurora IL 60504

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

Name of Employer Northern Trust Company Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 19 / 2007

Transaction ID: SA11A1.4677

Amount of Each Receipt this Period
400.00

Check

C. Full Name (Last, First, Middle Initial)
F Daniel Lindley

Mailing Address 1914 Academy Place

City State Zip Code
Wilmington DE 19806

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

Name of Employer Northern Trust Co of Delaware Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2007

Transaction ID: SA11A1.4735

Amount of Each Receipt this Period
600.00

Payroll \$300/month

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. William Lyons		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 11 E. North St.		Transaction ID: SA11A1.4679	
City State Zip Code Hinsdale IL 60521		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust Investments, NA Occupation Banker		Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Patrick McDougal		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2116 N. Clifton Ave		Transaction ID: SA11A1.4681	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust Company Occupation Banker		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Helen Nugent		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 2936 Dick Wilson Dr.		Transaction ID: SA11A1.4683	
City State Zip Code Sarasota FL 34240		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		Check	
Name of Employer Northern Trust, NA Occupation Banker		Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Thomas Oliveri		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 5170 Regency Isles Way		Transaction ID: SA11A1.4685
City Cooper City	State FL	Zip Code 33330
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 400.00	
Name of Employer Northern Trust, NA	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Bill Osborn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 120 De Windt Rd		Transaction ID: SA11A1.4687
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Roxanne Putignano		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 730 Creekside Dr. Unit 503		Transaction ID: SA11A1.4689
City Mount Prospect	State IL	Zip Code 60056
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	5700.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. James Roselle		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 484 Rockefeller Road		Transaction ID: SA11A1.4691
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. R Jana Schreuder		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 803 Armour Drive		Transaction ID: SA11A1.4759
City Lake Bluff	State IL	Zip Code 60044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer Northern Trust Company	Occupation Banker	Payroll \$400/month
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Frederick Waddell		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 1111 Ashland Ave.		Transaction ID: SA11A1.4693
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Northern Trust Company	Occupation Banker	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	15600.00

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Bill Richardson for President		Transaction ID: SB23.4950 Date of Disbursement																					
Mailing Address 303 Massachusetts Ave, N.E.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	4		2	0	7															
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/>	<input type="text" value="1500.00"/>																				
Candidate Name Bill Richardson		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. Bill Richardson for President Exploratory Committee		Transaction ID: SB23.4954 Date of Disbursement																					
Mailing Address 888 S. Figueroa St. Suite 400		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	6		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	6		2	0	7															
City Los Angeles	State CA	Zip Code 90017	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/>	<input type="text" value="2300.00"/>																				
Candidate Name Bill Richardson		Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Flores for US		Transaction ID: SB23.4927 Date of Disbursement																					
Mailing Address P.O. Box 804005		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	2		2	0	7															
City Chicago	State IL	Zip Code 60680	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution		<input type="checkbox"/>	<input type="text" value="300.00"/>																				
Candidate Name Manny Flores		Category/ Type																					
Office Sought: <input checked="" 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)	<input type="text" value="4100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Friends of Dick Durbin		Transaction ID: SB23.4956 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 101 W. Grand Ave Suite 200		Amount of Each Disbursement this Period 5000.00
City Chicago State IL Zip Code 60610		
Purpose of Disbursement Contribution Candidate Name Dick Durbin	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. John McCain 2008		Transaction ID: SB23.4958 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 1235 S. Clark Street Suite M		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22202		
Purpose of Disbursement Contribution Candidate Name John McCain	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: AZ District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Roskam for Congress		Transaction ID: SB23.4978 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 713		Amount of Each Disbursement this Period 500.00
City Wheaton State IL Zip Code 60189		
Purpose of Disbursement Contribution Candidate Name Peter Roskam	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 6	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. The National Republican Senatorial Committee		Transaction ID: SB23.4944 Date of Disbursement
Mailing Address 425 Second St, NE		<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name	<input type="text"/>	<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Treadwell for Congress		Transaction ID: SB23.4952 Date of Disbursement
Mailing Address P.O. Box 685		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2007"/>
City Saratoga Springs	State NY	Zip Code 20002
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name Sandy Treadwell	<input type="text"/>	<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 20		

Full Name (Last, First, Middle Initial) C. U.S. Senator John Cornyn's Campaign		Transaction ID: SB23.4946 Date of Disbursement
Mailing Address P.O. BOX 1360		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
City Tallahassee	State FL	Zip Code 32302
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name John Cornyn	<input type="text"/>	<input type="text" value="500.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" 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: TX District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial)
A. Vern Buchanan for Congress

Mailing Address 233 N. Orange Avenue

City State Zip Code
Sarasota FL 34236

Purpose of Disbursement
Contribution

Candidate Name
Vernon Buchanan

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 13

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.4948

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

14100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial) A. Melissa Bean for Congress		Transaction ID: SB29.4925 Date of Disbursement MM / DD / YYYY 06 / 21 / 2007
Mailing Address P.O. Box 3068		Amount of Each Disbursement this Period 1000.00
City Barrington State IL Zip Code 60011	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Melissa Bean		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Burnham Committee		Transaction ID: SB29.4942 Date of Disbursement MM / DD / YYYY 04 / 26 / 2007
Mailing Address 54 W. Hubbard St. Suite 200		Amount of Each Disbursement this Period 1500.00
City Chicago State IL Zip Code 60610	Category/ Type	
Purpose of Disbursement Contribution		
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) ▼	

Full Name (Last, First, Middle Initial) C. The Committee to Elect Anne M. Burke		Transaction ID: SB29.4936 Date of Disbursement MM / DD / YYYY 06 / 06 / 2007
Mailing Address 180 N. LaSalle Street #3800		Amount of Each Disbursement this Period 1500.00
City Chicago State IL Zip Code 60601	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Anne Burke		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTHERN TRUST COMPANY GOOD GOVERNMENT COMMITTEE

Full Name (Last, First, Middle Initial)

A. The Stevens for Senate Committee

Mailing Address 71 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Contribution

Candidate Name
Ted Stevens

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AK District:

Transaction ID: SB29.4934

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

4500.00