

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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
Donald A. Manzullo for Congress

ADDRESS (number and street) PO Box 7783
 Check if different than previously reported. (ACC)
Rockford IL 61126

2. **FEC IDENTIFICATION NUMBER** C00252973
CITY **STATE** **ZIP CODE**
STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)
IL 16

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 02 05 2008 in the State of IL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2007 through 01 16 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 Richard J. Brynteson

Signature of Treasurer Electronically Filed by Richard J. Brynteson Date 04 14 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Donald A. Manzullo for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	1

D	D
1	6

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)).....	131617.00	587429.97
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	2800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	131617.00	584629.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	82592.02	377648.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	844.20	1080.27
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	81747.82	376568.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	390574.91	
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	

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
Donald A. Manzullo for Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
1	6

Y	Y	Y	Y
2	0	0	8

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).....

76830.00

303984.33

(ii) Unitemized.....

9787.00

42882.00

(iii) TOTAL of contributions

86617.00

346866.33

from individuals..... ▶

1000.00

4850.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

44000.00

235713.64

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

131617.00

587429.97

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

844.20

1080.27

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

113.46

559.01

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

132574.66

589069.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	82592.02	377648.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	10000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2800.00
21. OTHER DISBURSEMENTS.....	7535.79	32400.79
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	90127.81	422849.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	348128.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	132574.66
25. SUBTOTAL (add Line 23 and Line 24).....	480702.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	90127.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	390574.91

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number	
Donald A. Manzullo		H0IL16085	
Name of Principal Campaign Committee		Committee ID Number	
Donald A. Manzullo for Congress		C C00252973	
Committee Address			
PO Box 7783			
City	State	ZIP	
Rockford	IL	61126-	
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election			
	Primary	General	
1. Gross receipts of authorized committees	552794.92	36274.33	
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00	
3. Gross receipts minus the candidate's personal contributions	552794.92	36274.33	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Richard Baehr
Mailing Address 1813 N Lincoln Park W
City Chicago State IL Zip Code 60614-5307
FEC ID number of contributing federal political committee. C

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 7
Transaction ID: 71026.C40266
Amount of Each Receipt this Period 500.00

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

Name of Employer Richard A. Baehrs Associates Occupation Owner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Roger Etnyre
Mailing Address 777 W II Route 64
City Oregon State IL Zip Code 61061-9352
FEC ID number of contributing federal political committee. C

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 7
Transaction ID: 71004.C40157
Amount of Each Receipt this Period 1200.00

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

Name of Employer E.D. Etnyre & Company Occupation Manager
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

C. Full Name (Last, First, Middle Initial)
Robert Funderburg
Mailing Address 10905 Olson Rd
City Belvidere State IL Zip Code 61008-9595
FEC ID number of contributing federal political committee. C

Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7
Transaction ID: 80103.C40549
Amount of Each Receipt this Period 2300.00

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

Name of Employer Alpine Bancorporation Occupation Banker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

SUBTOTAL of Receipts This Page (optional) 4000.00

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: <input 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	PAGE 7 / 138
---	--	--------------

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)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Craig McGuire	Date of Receipt MM / DD / YYYY 11 / 26 / 2007
	Mailing Address 305 S. Lowell Park Rd	Transaction ID: 71201.C40363
	City State Zip Code Mount Morris IL 61054	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self employed Occupation Retired Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Leslie Pearson	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 2136 Churchview Dr #10	Transaction ID: 71208.C40468
	City State Zip Code Rockford IL 61107-2593	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Pearson Fastener Occupation Chief Exec. Officer Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 100.00	

C.	Full Name (Last, First, Middle Initial) Leslie Pearson	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 2136 Churchview Dr #10	Transaction ID: 80103.C40535
	City State Zip Code Rockford IL 61107-2593	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Pearson Fastener Occupation Chief Exec. Officer Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00	

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 8 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Edward Weil

Mailing Address 66 Locust Road

City State Zip Code
Winnetka IL 60093

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
EitekLLC Board Member

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt 01 / 04 / 2008
Transaction ID: 80105.C40556
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 1899 High Grove Ln.

City State Zip Code
Naperville IL 60540

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Phoenix Closures Inc. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt 11 / 28 / 2007
Transaction ID: 71201.C40427
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 1105 Park Avenue

City State Zip Code
River Forest IL 60305-1309

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Information Requested Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt 11 / 30 / 2007
Transaction ID: 71201.C40443
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) 1750.00

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 / 138
(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)
Donald A. Manzullo for Congress

<p>A. Full Name (Last, First, Middle Initial) Jan Mansfield</p> <p>Mailing Address 8891 Harvest Hills Tr</p> <p>City State Zip Code Rockford IL 61114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Century 21 Country North, Inc.</p> <p>Occupation President</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">200.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2007</p> <p>Transaction ID: 71005.C40191</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) John Barelli</p> <p>Mailing Address 5625 Lambeth Lane</p> <p>City State Zip Code Rockford IL 61107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Surplus Management</p> <p>Occupation President</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">1500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2007</p> <p>Transaction ID: 80103.C40538</p> <p>Amount of Each Receipt this Period 1500.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Kenneth Nelson</p> <p>Mailing Address 8961 Spring Creek Rd</p> <p>City State Zip Code Rockford IL 61114-6758</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">550.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2007</p> <p>Transaction ID: 71201.C40376</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

SUBTOTAL of Receipts This Page (optional)	1750.00
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: (check only one)	PAGE 10 / 138
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Dan Loescher		Date of Receipt
	Mailing Address 11065 Covington Pl		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	Belvidere	IL	61008-8173
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Loescher & Associates		Occupation President	Transaction ID: 80103.C40526
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text"/> 500.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00	Receipt
			<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) Virginia Harting		Date of Receipt
	Mailing Address 1424 Pier Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7
	City	State	Zip Code
	Davis	IL	61019-9656
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Information Requested		Occupation Retired	Transaction ID: 71201.C40455
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text"/> 100.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 400.00	Receipt
			<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) Violet Johns		Date of Receipt
	Mailing Address 3157 N Spielman Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 6 / 2 0 0 7
	City	State	Zip Code
	Pecatonica	IL	61063-9722
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer N/A		Occupation housewife	Transaction ID: 71201.C40413
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General		<input type="text"/> 200.00
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 200.00	Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Henry Auchstetter
Mailing Address 716 Kelly Dr
City Rochelle State IL Zip Code 61068-1705
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Engineer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 11 / 26 / 2007
Transaction ID: 71201.C40398
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Fred Young
Mailing Address 39 Lovesee Rd
City Roscoe State IL Zip Code 61073-8731
FEC ID number of contributing federal political committee. **C**
Name of Employer Forest City Gear Occupation President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 11 / 08 / 2007
Transaction ID: 71113.C40309
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Leonard
Mailing Address 284 Gleasman Rd Box 698
City Roscoe State IL Zip Code 61073-8258
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 11 / 26 / 2007
Transaction ID: 71201.C40382
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1750.00
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 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
James Gingrich

Mailing Address 2930 N Winnebago Rd

City Winnebago State IL Zip Code 61088-8761

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

Name of Employer Hamilton-Sundstrand Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 04 / 2007

Transaction ID: 71004.C40144

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Anthony Capriola

Mailing Address 2969 Betty Ln

City Winnebago State IL Zip Code 61088-9634

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 08 / 2007

Transaction ID: 71113.C40310

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Clifford Hall

Mailing Address 9047 Dickenson Rd

City Winnebago State IL Zip Code 61088-8933

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

Name of Employer Sundstrand Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 11 / 28 / 2007

Transaction ID: 71201.C40425

Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Jean VanLandingham

Mailing Address 4236 Westfield Dr.

City State Zip Code
Rockford IL 61101-6012

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
11 / 26 / 2007

Transaction ID: 71201.C40378

Amount of Each Receipt this Period 100.00

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

B.

Full Name (Last, First, Middle Initial)
Ellwyn Englof

Mailing Address 1344 Deanna Dr

City State Zip Code
Rockford IL 61103-8611

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-employed Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71208.C40482

Amount of Each Receipt this Period 200.00

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

C.

Full Name (Last, First, Middle Initial)
James Bittle

Mailing Address 4281 Montalvo Ct

City State Zip Code
Naples FL 34109

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
12 / 07 / 2007

Transaction ID: 71208.C40484

Amount of Each Receipt this Period 500.00

Receipt
 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 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Michael Delany

Mailing Address 5406 Winding Creek Pl

City State Zip Code
Rockford IL 61114-7718

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

Name of Employer Retired Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
100.00

Date of Receipt
MM / DD / YYYY
10 / 04 / 2007

Transaction ID: 71004.C40166

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

B.

Full Name (Last, First, Middle Initial)
Maurice Gambrel

Mailing Address 1922 7th St

City State Zip Code
Rockford IL 61104

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

Name of Employer Natl Business & Indust. Centr Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
500.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2007

Transaction ID: 80103.C40539

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

C.

Full Name (Last, First, Middle Initial)
Daniel Arnold

Mailing Address 2004 El Rancho Ln

City State Zip Code
Rockford IL 61107-1329

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

Name of Employer Ranger Enterprises Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2300.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2007

Transaction ID: 71201.C40333

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

SUBTOTAL of Receipts This Page (optional) ▶ **2900.00**

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Cedric Blazer

Mailing Address 2067 N Mulford Rd

City State Zip Code
Rockford IL 61107-2546

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

Name of Employer Zenith Cutter Occupation Executive Dir. Human Res.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40161

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 2067 N Mulford Rd

City State Zip Code
Rockford IL 61107-2546

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

Name of Employer Zenith Cutter Occupation Executive Dir. Human Res.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40163

Amount of Each Receipt this Period
-1700.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

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

Mailing Address 2067 N Mulford Rd

City State Zip Code
Rockford IL 61107-2546

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

Name of Employer Zenith Cutter Occupation Executive Dir. Human Res.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40164

Amount of Each Receipt this Period
1700.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Humphris
Mailing Address 2103 Silverthorn Dr
City State Zip Code
Rockford IL 61107-1626
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Humphris Kiefer & Assoc., Inc. Manufacturers Representative
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7
Transaction ID: 71018.C40222
Amount of Each Receipt this Period
500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas Humphris
Mailing Address 2103 Silverthorn Dr
City State Zip Code
Rockford IL 61107-1626
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Humphris Kiefer & Assoc., Inc. Manufacturers Representative
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7
Transaction ID: 71201.C40402
Amount of Each Receipt this Period
250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Deedra Black
Mailing Address 6459 Shiloh Close
City State Zip Code
Rockford IL 61107-2663
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Title Underwriters Agency Secretary/Treasurer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7
Transaction ID: 71023.C40249
Amount of Each Receipt this Period
500.00
Receipt
 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 17 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
W. Stephen Minore

Mailing Address 2616 Spring Creek Rd

City State Zip Code
Rockford IL 61107-1066

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

Name of Employer: Rockford Anesthesiology Associ
Occupation: Anesthesiologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 11 / 28 / 2007
Transaction ID: 80105.C40561
Amount of Each Receipt this Period: 2000.00

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

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

Mailing Address 3312 Crest Rd

City State Zip Code
Rockford IL 61107-1109

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

Name of Employer: Mechanical Tool & Enginee- ring
Occupation: Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: 80103.C40540
Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 3607 Crosby St

City State Zip Code
Rockford IL 61107-4811

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

Name of Employer: Retired
Occupation: Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt: 11 / 20 / 2007
Transaction ID: 71201.C40340
Amount of Each Receipt this Period: 100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3100.00**

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 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Harold Branstiter

Mailing Address 5528 Blackthorn Dr.

City State Zip Code
Rockford IL 61107-1782

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 04 / 2007

Transaction ID: 71004.C40184

Amount of Each Receipt this Period
20.00

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

B.

Full Name (Last, First, Middle Initial)
Harold Branstiter

Mailing Address 5528 Blackthorn Dr.

City State Zip Code
Rockford IL 61107-1782

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

320.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 31 / 2007

Transaction ID: 71031.C40291

Amount of Each Receipt this Period
20.00

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

C.

Full Name (Last, First, Middle Initial)
Harold Branstiter

Mailing Address 5528 Blackthorn Dr.

City State Zip Code
Rockford IL 61107-1782

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

360.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 04 / 2008

Transaction ID: 80105.C40558

Amount of Each Receipt this Period
40.00

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

SUBTOTAL of Receipts This Page (optional) 80.00

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 19 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Patrick Bachrodt

Mailing Address PO Box 5647

City State Zip Code
Rockford IL 61125-0647

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Lou Bachrodt Auto Mall President

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 20 / 2007

Transaction ID: 71201.C40326

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
James Mathers

Mailing Address 5720 Coachman Ct

City State Zip Code
Rockford IL 61107-2507

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Physician

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 07 / 2007

Transaction ID: 71208.C40481

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Nadia Johnson

Mailing Address 1712 Secluded Woods Dr

City State Zip Code
Rockford IL 61107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Sundstrand N/A

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 04 / 2007

Transaction ID: 71004.C40149

Amount of Each Receipt this Period
200.00

Receipt
 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 20 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Carolyn Kobler
Mailing Address 6729 Mill Brook Dr
City Rockford State IL Zip Code 61108-4310
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 10 / 04 / 2007
Transaction ID: 71004.C40138
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gaynell Lundberg
Mailing Address 5763 Linden Rd
City Rockford State IL Zip Code 61109-3512
FEC ID number of contributing federal political committee. **C**
Name of Employer Vern Lundberg Inc. Occupation Self-Employed
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt 11 / 20 / 2007
Transaction ID: 71201.C40325
Amount of Each Receipt this Period 250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Richard Todd
Mailing Address 6238 Chatsworth Dr
City Rockford State IL Zip Code 61109-1804
FEC ID number of contributing federal political committee. **C**
Name of Employer Todd Transit Occupation President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 11 / 26 / 2007
Transaction ID: 71201.C40381
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Glen Ekberg

Mailing Address 8065 Harrisville Rd

City State Zip Code
Rockford IL 61109-5409

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

Name of Employer Occupation
Circle Boring and Machine Co. Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40375

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 3761 Fox Pointe

City State Zip Code
Rockford IL 61114-7072

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

Name of Employer Occupation
Self-employed Dentist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: 71201.C40335

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 3928 Tiffany Ct

City State Zip Code
Rockford IL 61114-6185

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

Name of Employer Occupation
Sjostrom Construction Co. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40418

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Virginia Carlson

Mailing Address 4303 Garden Ln

City State Zip Code
Rockford IL 61114-4703

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

Name of Employer N/A Occupation housewife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: 71201.C40350

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

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

Mailing Address 4718 White Oak Ave

City State Zip Code
Rockford IL 61114-6238

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

Name of Employer Geraghty & Assoc Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: 71208.C40485

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

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

Mailing Address 10710 Deerpath Rd

City State Zip Code
Woodstock IL 60098-8060

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

Name of Employer American Community Bank Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: 71201.C40452

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

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Joan Lewis
Mailing Address 370 Woodstock
City State Zip Code
Crystal Lake IL 60014-4232
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7
Transaction ID: 71201.C40390
Amount of Each Receipt this Period
100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Frank Stampler
Mailing Address 432 Lakeside Ave
City State Zip Code
Crystal Lake IL 60014-5626
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Stampler & Co. P.C. CPA
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7
Transaction ID: 71201.C40357
Amount of Each Receipt this Period
100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Martha Reedy
Mailing Address 5607 Jay Dr
City State Zip Code
Crystal Lake IL 60014-4645
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
N/A housewife
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 7
Transaction ID: 71114.C40317
Amount of Each Receipt this Period
500.00
Receipt
 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) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Raymond Monroe

Mailing Address 5708 Aspen Ct

City State Zip Code
Crystal Lake IL 60014-3905

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Steel Founders Society of Amer Exec VP

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2007

Transaction ID: 71104.C40298

Amount of Each Receipt this Period
750.00

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

B.

Full Name (Last, First, Middle Initial)
Joan Pierce

Mailing Address 5420 Woodlawn Rd

City State Zip Code
Creston IL 60113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-employed Farmer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 04 / 2007

Transaction ID: 71004.C40168

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Steven Clark

Mailing Address 5495 Roanoke Road

City State Zip Code
Rockford IL 61107-1687

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Doyle and Associates Realtor

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2007

Transaction ID: 71023.C40261

Amount of Each Receipt this Period
250.00

Receipt
 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 25 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Howard Christensen
Mailing Address 1135 N Shore Drive
City State Zip Code
Crystal Lake IL 60014-5247
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
United Airlines Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7
Transaction ID: 71208.C40460
Amount of Each Receipt this Period
200.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael Ballard
Mailing Address 4444 Sentinel Rock Terr
City State Zip Code
Larkspur CO 80118-8904
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
United Airlines pilot
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7
Transaction ID: 71208.C40466
Amount of Each Receipt this Period
250.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Menis
Mailing Address 1731 Galloway Circle
City State Zip Code
Inverness IL 60010
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-employed Dentist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7
Transaction ID: 71201.C40417
Amount of Each Receipt this Period
500.00
Receipt
 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 26 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Dwayne Query

Mailing Address 5775 S Brooklyn Rd

City State Zip Code
Rochelle IL 61068

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

Name of Employer Occupation
Query Insurance Agency Insurance Agent

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 7 / 2 0 0 7

Transaction ID: 71208.C40483

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 405 North 3rd Street

City State Zip Code
Oregon IL 61061

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

Name of Employer Occupation
Retired Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40349

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 1512 Crayton Circle E

City State Zip Code
Dekalb IL 60115-1757

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

Name of Employer Occupation
Comed Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 7

Transaction ID: 71201.C40447

Amount of Each Receipt this Period
500.00

Receipt
 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 27 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Karl Gallant

Mailing Address 9506 Gauge Drive

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer Occupation
Aduston Consulting, LLC Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40176

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 107 S. Division

City State Zip Code
Polo IL 61064

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71018.C40225

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 8614 Byron Hills Dr
PO Box 924

City State Zip Code
Byron IL 61010

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

Name of Employer Occupation
Re-Max Broker/Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: 71104.C40303

Amount of Each Receipt this Period
100.00

Receipt
 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: (check only one)	PAGE 28 / 138
	<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)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Scott Hendee	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 13372 Marylynne Dr.	Transaction ID: 71208.C40471
	City State Zip Code Rockton IL 61072	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Riverside Community Bank	Occupation Sr. Vice President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) David Wescott	Date of Receipt MM / DD / YYYY 10 / 31 / 2007
	Mailing Address 1313 Behan Rd	Transaction ID: 71031.C40275
	City State Zip Code Crystal Lake IL 60014	Amount of Each Receipt this Period 4600.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Wescott Group	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

C.	Full Name (Last, First, Middle Initial) David Wescott	Date of Receipt MM / DD / YYYY 10 / 31 / 2007
	Mailing Address 1313 Behan Rd	Transaction ID: 71031.C40276
	City State Zip Code Crystal Lake IL 60014	Amount of Each Receipt this Period -2300.00
	FEC ID number of contributing federal political committee. C	Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
Name of Employer Wescott Group	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional)	4700.00
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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
David Wescott

Mailing Address 1313 Behan Rd

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Wescott Group President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40277

Amount of Each Receipt this Period
2300.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

4600.00

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

Mailing Address 3847 Gray Fox Run

City State Zip Code
Rockford IL 61114-5717

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

Name of Employer Occupation
Rockford Gastroenterology Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71018.C40229

Amount of Each Receipt this Period
500.00

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

500.00

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

Mailing Address 8361 McMichael Road

City State Zip Code
Caledonia IL 61011

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71005.C40196

Amount of Each Receipt this Period
500.00

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

500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Robert Wimmer

Mailing Address 134 Callaway Cove

City State Zip Code
Loves Park IL 61111

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

Name of Employer Occupation
Aqua Aerobic President & CEO

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: 71201.C40334

Amount of Each Receipt this Period

2300.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
Joseph Daleiden

Mailing Address 2202 Stieg Rd

City State Zip Code
Woodstock IL 60098-7345

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

Name of Employer Occupation
Information Requested Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 7

Transaction ID: 71113.C40307

Amount of Each Receipt this Period

100.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Carol Wescott

Mailing Address 1313 Behan Rd

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Housewife Mom/Wife

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40281

Amount of Each Receipt this Period

4600.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

7000.00

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 31 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Carol Wescott

Mailing Address 1313 Behan Rd

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Housewife Mom/Wife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40282

Amount of Each Receipt this Period
-2300.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Carol Wescott

Mailing Address 1313 Behan Rd

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Housewife Mom/Wife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40283

Amount of Each Receipt this Period
2300.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Robert Weisheit

Mailing Address 1011 Sesame

City State Zip Code
Franklin Park IL 60131

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

Name of Employer Occupation
R.C. Weisheit Co. Self-Employed

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40153

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **100.00**

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Rosemary Eike
Mailing Address 1500 W Washington
City Oregon State IL Zip Code 61061
FEC ID number of contributing federal political committee. **C**
Name of Employer Eike Insurance Occupation Insurance Broker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt 10 / 10 / 2007
Transaction ID: 71018.C40203
Amount of Each Receipt this Period 100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
J.W. Wymer
Mailing Address 67 Oak Creek Dr
City Yorkville State IL Zip Code 60560
FEC ID number of contributing federal political committee. **C**
Name of Employer Fairmount Minerals Occupation Vice President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 30 / 2007
Transaction ID: 71104.C40299
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Miceli
Mailing Address 9117 Harmony Hill Rd.
City Marengo State IL Zip Code 60152
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 16 / 2007
Transaction ID: 71018.C40228
Amount of Each Receipt this Period 500.00
Receipt
 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 33 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Rodney Rochlitz

Mailing Address 449 Barbara Ct. Apt. B

City State Zip Code
Marengo IL 60152-3098

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

Name of Employer Disabled Veteran Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: 71004.C40154

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 149 Adare Dr

City State Zip Code
Cary IL 60013-1695

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

Name of Employer Kimball Hill Management Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: 71201.C40358

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 43 Musket Trail

City State Zip Code
Simsbury CT 06070

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

Name of Employer Hamilton-Sundstrand Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	2	/	2	0	0	8

Transaction ID: 80114.C40568

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2900.00**

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: (check only one)	PAGE 34 / 138
	<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)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Allison Shulman		Date of Receipt
	Mailing Address 4426 S 36th St, Apt #A2		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Arlington	VA	22206
	FEC ID number of contributing federal political committee. C		Transaction ID: 71018.C40233
Name of Employer Information Requested		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		Partner	<input type="text" value="1000.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Election Cycle-to-Date ▼	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	

B.	Full Name (Last, First, Middle Initial) Laura Lapping		Date of Receipt
	Mailing Address 1521 Voltz Rd.		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Northbrook	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: 71113.C40312
Name of Employer Requested - Not provided		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		Requested not provided	<input type="text" value="250.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Election Cycle-to-Date ▼	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	

C.	Full Name (Last, First, Middle Initial) Thomas Oakley		Date of Receipt
	Mailing Address PO Box 909		<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Quincy	IL	62306-0909
	FEC ID number of contributing federal political committee. C		Transaction ID: 80103.C40532
Name of Employer Quincy Newspapers, Inc.		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		President	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Election Cycle-to-Date ▼	Earmarked(Receipt) <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 138
(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
TAR PAC

Mailing Address TV & Radio PAC
1

City Washington State DC Zip Code 20036

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: CM37480103.C40532

Amount of Each Receipt this Period
500.00

Memo - Conduit memo total
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Earmarked Memo - Conduit total

B.

Full Name (Last, First, Middle Initial)
William Hickey

Mailing Address 5500 W 73rd St

City Chicago State IL Zip Code 60638

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

Name of Employer Lapham-Hickey Steel Corp Occupation Exec. Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 7

Transaction ID: 71201.C40444

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Galina Grischenko

Mailing Address 5572 Stockton Dr

City Rockford State IL Zip Code 61109

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

Name of Employer Requested - Not provided Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40373

Amount of Each Receipt this Period
100.00

Receipt
 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 36 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Gerald Call

Mailing Address 900 Mark Ln Apt 115

City State Zip Code
Wheeling IL 60090

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
American Foundry Society Exec VP

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
10 / 30 / 2007

Transaction ID: 71104.C40295

Amount of Each Receipt this Period
750.00

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

B.

Full Name (Last, First, Middle Initial)
Brett Palmer

Mailing Address 7002 Vagabond Dr

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Natl Assn of Insurance Co-
miss Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
10 / 01 / 2007

Transaction ID: 71004.C40094

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
David Brown

Mailing Address 4314 Northwest Dr

City State Zip Code
Des Moines IA 50310

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Iowa Property Exchange,
LLC Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
10 / 05 / 2007

Transaction ID: 71005.C40190

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 1750.00

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 / 138
(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial) Barbara Carow		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address 621 Cress Creek Ln		Transaction ID: 71018.C40205
City Crystal Lake	State IL	Zip Code 60014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Carow International, Inc	Occupation Corporate Administration	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

B.

Full Name (Last, First, Middle Initial) Nancy Clay		Date of Receipt MM / DD / YYYY 10 / 23 / 2007
Mailing Address 5670 N Augusta		Transaction ID: 71023.C40262
City Fresno	State CA	Zip Code 93710
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer City of Fresno	Occupation Clerk	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Ed Lasky		Date of Receipt MM / DD / YYYY 10 / 31 / 2007
Mailing Address 1250 Ridge Rd		Transaction ID: 71031.C40272
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Requested - Not provided	Occupation Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	750.00
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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
David Wescott, Jr
Mailing Address 1313 Behan Rd
City State Zip Code
Crystal Lake IL 60014
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7
Transaction ID: 71031.C40278
Amount of Each Receipt this Period
4600.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Wescott, Jr
Mailing Address 1313 Behan Rd
City State Zip Code
Crystal Lake IL 60014
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7
Transaction ID: 71031.C40279
Amount of Each Receipt this Period
-2300.00
Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
David Wescott, Jr
Mailing Address 1313 Behan Rd
City State Zip Code
Crystal Lake IL 60014
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7
Transaction ID: 71031.C40280
Amount of Each Receipt this Period
2300.00
Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 4600.00
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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Michael Dowd
Mailing Address 5N791 Rochefort Ln
City Wayne State IL Zip Code 60184
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3100.00
Date of Receipt 10 / 31 / 2007
Transaction ID: 71031.C40287
Amount of Each Receipt this Period 3100.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael Dowd
Mailing Address 5N791 Rochefort Ln
City Wayne State IL Zip Code 60184
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3100.00
Date of Receipt 10 / 31 / 2007
Transaction ID: 71031.C40285
Amount of Each Receipt this Period -800.00
Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Michael Dowd
Mailing Address 5N791 Rochefort Ln
City Wayne State IL Zip Code 60184
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested - Not provided Occupation Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3100.00
Date of Receipt 10 / 31 / 2007
Transaction ID: 71031.C40284
Amount of Each Receipt this Period 800.00
Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 3100.00
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 40 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Diane Dowd

Mailing Address 5N791 Rochefort Ln

City State Zip Code
Wayne IL 60184

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

Name of Employer Requested - Not provided Occupation Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40288

Amount of Each Receipt this Period
3100.00

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

B.

Full Name (Last, First, Middle Initial)
Diane Dowd

Mailing Address 5N791 Rochefort Ln

City State Zip Code
Wayne IL 60184

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

Name of Employer Requested - Not provided Occupation Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40289

Amount of Each Receipt this Period
-800.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Diane Dowd

Mailing Address 5N791 Rochefort Ln

City State Zip Code
Wayne IL 60184

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

Name of Employer Requested - Not provided Occupation Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71031.C40290

Amount of Each Receipt this Period
800.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **3100.00**

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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
George Curtis
Mailing Address 304 S McDonald St
City Attica State IN Zip Code 47918
FEC ID number of contributing federal political committee. **C**
Name of Employer Harrison Steel Occupation Chairman
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
500.00
Date of Receipt 10 / 30 / 2007
Transaction ID: 71104.C40294
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Frederick Wile
Mailing Address 5415 10th Ave
City Meridian State MS Zip Code 39305-1900
FEC ID number of contributing federal political committee. **C**
Name of Employer Southern Cast Products Occupation President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
500.00
Date of Receipt 10 / 30 / 2007
Transaction ID: 71104.C40297
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bryan Burgy
Mailing Address 1820 Stratford Ln
City Rockford State IL Zip Code 61107
FEC ID number of contributing federal political committee. **C**
Name of Employer Rockford Fastener Inc. Occupation President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
2300.00
Date of Receipt 11 / 20 / 2007
Transaction ID: 71201.C40337
Amount of Each Receipt this Period 2300.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**
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 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Maurice Taylor

Mailing Address 1477 Maine St

City State Zip Code
Quincy IL 62301-4260

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

Name of Employer Occupation
Titan Tire Chairman and CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40500

Amount of Each Receipt this Period
4600.00

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

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

Mailing Address 1477 Maine St

City State Zip Code
Quincy IL 62301-4260

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

Name of Employer Occupation
Titan Tire Chairman and CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40501

Amount of Each Receipt this Period
-2300.00

Redesignation FROM Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

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

Mailing Address 1477 Maine St

City State Zip Code
Quincy IL 62301-4260

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

Name of Employer Occupation
Titan Tire Chairman and CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40502

Amount of Each Receipt this Period
2300.00

Redesignation TO Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **4600.00**

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 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Donald Miller

Mailing Address 9244 W Point Dr

City Indianapolis State IN Zip Code 46268

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 12 / 07 / 2007

Transaction ID: 71208.C40458

Amount of Each Receipt this Period 600.00

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

B.

Full Name (Last, First, Middle Initial)
David Miller

Mailing Address 14500 Twin Oaks Dr

City Carmel State IN Zip Code 46032

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

Name of Employer Requested - Not provided Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 12 / 07 / 2007

Transaction ID: 71208.C40459

Amount of Each Receipt this Period 600.00

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

C.

Full Name (Last, First, Middle Initial)
Todd Thorpe

Mailing Address 632 Independence Ave, SE

City Washington State DC Zip Code 20003

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

Name of Employer Bockorny Group Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 14 / 2007

Transaction ID: 71214.C40509

Amount of Each Receipt this Period 250.00

Receipt
 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 44 / 138

(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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Robert Wetzel

Mailing Address 20 Braeburn Ln

City State Zip Code
Barrington Hills IL 60010

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

Name of Employer Requested - Not provided

Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 20 / 2007

Transaction ID: 80103.C40516

Amount of Each Receipt this Period

200.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
Lori Hess

Mailing Address 43 Musket Trail

City State Zip Code
Simsbury CT 06070

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

Name of Employer General Electric

Occupation HR Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 14 / 2008

Transaction ID: 80114.C40569

Amount of Each Receipt this Period

2300.00

Receipt

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

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

76830.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

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

Mailing Address Natl Rifle Assoc of America
11250 Waples Mill Rd

City State Zip Code
Fairfax VA 22030-7400

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 7

Transaction ID: 71104.C40300

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address Intl Assoc of Holiday Inns, Inc P
3 Ravinia Dr. #2900

City State Zip Code
Atlanta GA 30346

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 0 / 2 0 0 7

Transaction ID: 71201.C40320

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address IL Tool Works PAC
3600 West Lake Avenue

City State Zip Code
Glenview IL 60025

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40508

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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 / 138

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
John Deere PAC

Mailing Address John Deere PAC
One John Deere Place

City Moline State IL Zip Code 61265-8098

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
11 / 08 / 2007

Transaction ID: 71113.C40308

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
John Deere PAC

Mailing Address John Deere PAC
One John Deere Place

City Moline State IL Zip Code 61265-8098

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
11 / 30 / 2007

Transaction ID: 71201.C40456

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Goodyear Good Govt Fund

Mailing Address Goodyear Good Govt Fund
1420 New York Avenue, NW, Ste 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: 80103.C40545

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
ADPAC

Mailing Address American Dental PAC
1111-14th Street, N. W., Suite 110

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40182

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
ACRE PAC

Mailing Address Action Comm. for Rural Electrifica
4301 Wilson Boulevard

City Arlington State VA Zip Code 22203

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40177

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
BPAC

Mailing Address Boeing Company PAC
PO Box 3707, MS 14-49

City Seattle State WA Zip Code 98124

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40421

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 138

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
ECPAC

Mailing Address Electrical Construction PAC
3 Bethesda Metro Center, Ste 1100

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: 71201.C40319

Amount of Each Receipt this Period

3000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
ECPAC

Mailing Address Electrical Construction PAC
3 Bethesda Metro Center, Ste 1100

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40512

Amount of Each Receipt this Period

2000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Ford Motor Co Civic Action Fund

Mailing Address Ford Motor Co Civic Action Fund
1350 I Street, NW, Ste 1000

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40506

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

6000.00

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 / 138

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
BANKPAC

Mailing Address Am Bankers Assn PAC
1120 Connecticut Ave., NW, Suite 8

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80103.C40547

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
TAR PAC

Mailing Address TV & Radio PAC
1771 N. Street NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 7

Transaction ID: 80123.C40587

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
COUNCILPAC

Mailing Address Coun of Insurance Agents & Brokers
701 Pennsylvania Ave, NW, Ste 750

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40173

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 138

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
CME/PAC

Mailing Address Chicago Mercantile Exchange
701 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004-2608

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 80103.C40543

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
CNA Citizens for Good Government PAC

Mailing Address CNA Citizens for Good Government P
CNA Plaza

City State Zip Code
Chicago IL 60685-0001

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71018.C40235

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
AHAPAC

Mailing Address Am Hospital Assn PAC
325 Seventh St., NW #700

City State Zip Code
Washington DC 20004-2802

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 80103.C40513

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
ExelonPAC

Mailing Address Exelon Corporation PAC
PO Box 805379

City Chicago State IL Zip Code 60680-5379

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 10 / 04 / 2007
Transaction ID: 71004.C40174
 Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address Exelon Corporation PAC
PO Box 805379

City Chicago State IL Zip Code 60680-5379

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: 80103.C40546
 Amount of Each Receipt this Period: 1500.00

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

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

Mailing Address Amer Moving & Storage Assoc PAC
1611 Duke Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 10 / 16 / 2007
Transaction ID: 71018.C40234
 Amount of Each Receipt this Period: 1500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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 / 138

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
NCPA PAC

Mailing Address Natl Community Pharmacists Assoc P
205 Daingerfield Road

City State Zip Code
Alexandria VA 22314-2885

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 7

Transaction ID: 71201.C40318

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
NCPA PAC

Mailing Address Natl Community Pharmacists Assoc P
205 Daingerfield Road

City State Zip Code
Alexandria VA 22314-2885

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40507

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Pfizer PAC

Mailing Address Pfizer PAC
235 East 42nd Street

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40185

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
WAL-PAC

Mailing Address Wal-Mart Inc, PAC for Responsible
702 SW 8th Street

City Bentonville State AR Zip Code 72716-8071

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 04 / 2007
Transaction ID: 71004.C40181
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address United Technologies Corp. PAC
1401 Eye St., NW, #600

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7300.00

Date of Receipt 10 / 31 / 2007
Transaction ID: 71031.C40268
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address Amer Society of Assn Executives PA
1575 I Street, NW

City Washington State DC Zip Code 20005-1103

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 04 / 2007
Transaction ID: 71004.C40178
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 138

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Abbott Laboratories PAC

Mailing Address Abbott Laboratories PAC
100 Abbott Prk Rd

City State Zip Code
North Chicago IL 60064-6028

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71023.C40248

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
General Mills PAC

Mailing Address General Mills, Inc. PAC
915 E. Pleasant St.

City State Zip Code
Belvidere IL 61008

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 71208.C40487

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
NATCA

Mailing Address Natl Air Traffic Controllers Assoc
1325 Massachusetts Avenue, NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40510

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Anheuser-BuschPAC

Mailing Address Anheuser-BuschPAC
1401 I Street NW Ste 200

City Washington State DC Zip Code 20005-2225

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40183

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Anheuser-BuschPAC

Mailing Address Anheuser-BuschPAC
1401 I Street NW Ste 200

City Washington State DC Zip Code 20005-2225

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 6 / 2 0 0 7

Transaction ID: 71201.C40423

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Anheuser-BuschPAC

Mailing Address Anheuser-BuschPAC
1401 I Street NW Ste 200

City Washington State DC Zip Code 20005-2225

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 7

Transaction ID: 80103.C40530

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 138

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
OODA PAC

Mailing Address Owner-Operator Indep Drivers Assn
122 C Street NW Ste 520

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 7

Transaction ID: 80117.C40570

Amount of Each Receipt this Period

1000.00

Receipt

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

B.

Full Name (Last, First, Middle Initial)
Prudential Financial PAC

Mailing Address Prudential Financial, Inc. PAC
751 Broad Street

City State Zip Code
Newark NJ 07102

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40179

Amount of Each Receipt this Period

1000.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)
Novo Nordisk PAC

Mailing Address Novo Nordisk Changing Diabetes PAC
500 New Jersey Ave NW, Ste 350

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71004.C40180

Amount of Each Receipt this Period

1000.00

Receipt

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: PAGE 57 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
Dickstein Shapiro LLP PAC

Mailing Address Dickstein Shapiro LLP PAC
1825 Eye St, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 14 / 2007
Transaction ID: 71214.C40511
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
Liberty Mutual Insurance Co PAC

Mailing Address Liberty Mutual Ins Co PAC
175 Berkeley St

City Boston State MA Zip Code 02117

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2007
Transaction ID: 80103.C40544
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
The Intuit 21st Century Leadership Fund

Mailing Address Intuit 21st Century Leadership Fun
6220 Greenwich Dr

City San Diego State CA Zip Code 92122

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2007
Transaction ID: 80103.C40548
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

TOTAL This Period (last page this line number only) ▶ 44000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 138
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
John S Fund (John Shimkus IL-19)
 Mailing Address 1208 Leland Ave
 City Springfield State IL Zip Code 62704
 FEC ID number of contributing federal political committee. **C** C00390831
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 7
 Transaction ID: 71005.C40189
 Amount of Each Receipt this Period
 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 138
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
NRCC

Mailing Address Natl Republican Congressional Cmt
320 First Street, S. E.

City State Zip Code
Washington DC 20003-

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
739.20

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 71214.C40503

Amount of Each Receipt this Period
739.20

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

SUBTOTAL of Receipts This Page (optional)	▶	739.20
TOTAL This Period (last page this line number only)	▶	739.20

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 138
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Amcore Bank

Mailing Address 501 7th St

City State Zip Code
Rockford IL 61104-1242

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 483.77

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 7

Transaction ID: 71208.C40488

Amount of Each Receipt this Period
38.22

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

B.

Full Name (Last, First, Middle Initial)
Amcore Bank

Mailing Address 501 7th St

City State Zip Code
Rockford IL 61104-1242

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 520.77

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 7

Transaction ID: 80103.C40553

Amount of Each Receipt this Period
37.00

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

C.

Full Name (Last, First, Middle Initial)
Amcore Bank

Mailing Address 501 7th St

City State Zip Code
Rockford IL 61104-1242

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 559.01

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7

Transaction ID: 80103.C40552

Amount of Each Receipt this Period
38.24

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

SUBTOTAL of Receipts This Page (optional)	113.46
TOTAL This Period (last page this line number only)	113.46

**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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement Credit Card 11/29/07; See below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71117.E12729 Date of Disbursement 11 / 15 / 2007 Amount of Each Disbursement this Period 2732.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 11/29/07; SEE BELOW:
B.	Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 4315 E State City Rockford State IL Zip Code 61108- Purpose of Disbursement Copy Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12777 Date of Disbursement 10 / 26 / 2007 Amount of Each Disbursement this Period 22.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: COPY EXPENSE
C.	Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 4315 E State City Rockford State IL Zip Code 61108- Purpose of Disbursement Copy Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12776 Date of Disbursement 10 / 26 / 2007 Amount of Each Disbursement this Period 1.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: COPY EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2732.85

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Forest View Storage

Mailing Address 11707 N. 2nd Street

City Loves Park State IL Zip Code 61111-

Purpose of Disbursement
Storage expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71201.E12745
Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

65.00

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

[MEMO ITEM]
MEMO: STORAGE EXPENSE

B.

Full Name (Last, First, Middle Initial)
Kroger

Mailing Address 1715 Rural Street

City Rockford State IL Zip Code 61107-

Purpose of Disbursement
Volunteer Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71208.E12773
Date of Disbursement

10 / 18 / 2007

Amount of Each Disbursement this Period

14.10

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

[MEMO ITEM]
MEMO: VOLUNTEER EXPENSE

C.

Full Name (Last, First, Middle Initial)
Liberty Self Storage

Mailing Address 4114 176 East

City Crystal Lake State IL Zip Code 60012-

Purpose of Disbursement
Storage expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71201.E12746
Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

85.00

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

[MEMO ITEM]
MEMO: STORAGE EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 71208.E12778 Date of Disbursement 10 / 27 / 2007
	Mailing Address 5430 E State St	Amount of Each Disbursement this Period 4.86
	City Rockford State IL Zip Code 61108-2380	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Copy Expense	[MEMO ITEM] MEMO: COPY EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rock Valley Water	Transaction ID: 71208.E12775 Date of Disbursement 10 / 24 / 2007
	Mailing Address 702 N Madison	Amount of Each Disbursement this Period 8.00
	City Rockford State IL Zip Code 61107-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Water Expense	[MEMO ITEM] MEMO: WATER EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rockford Register Star	Transaction ID: 71201.E12747 Date of Disbursement 10 / 15 / 2007
	Mailing Address 99 E State St	Amount of Each Disbursement this Period 4.35
	City Rockford State IL Zip Code 61104-1009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Subscription expense	[MEMO ITEM] MEMO: SUBSCRIPTION EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: 71208.E12782 Date of Disbursement 11 / 05 / 2007
	Mailing Address 5225 Harrison Avenue	Amount of Each Disbursement this Period 1230.00
	City Rockford State IL Zip Code 61125-9300	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Expense Candidate Name	<input type="checkbox"/> [MEMO ITEM] MEMO: POSTAGE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: 71208.E12785 Date of Disbursement 11 / 08 / 2007
	Mailing Address 5225 Harrison Avenue	Amount of Each Disbursement this Period 615.00
	City Rockford State IL Zip Code 61125-9300	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Expense Candidate Name	<input type="checkbox"/> [MEMO ITEM] MEMO: POSTAGE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71208.E12781 Date of Disbursement 11 / 05 / 2007
	Mailing Address PO Box 25505	Amount of Each Disbursement this Period 105.03
	City Lehigh Valley State PA Zip Code 18002-5505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone Expense Candidate Name	<input type="checkbox"/> [MEMO ITEM] MEMO: PHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71208.E12783 Date of Disbursement 11 / 08 / 2007
	Mailing Address PO Box 25505	Amount of Each Disbursement this Period 126.12
	City Lehigh Valley State PA Zip Code 18002-5505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Phone Expense	[MEMO ITEM] MEMO: PHONE EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wal-Mart	Transaction ID: 71208.E12786 Date of Disbursement 11 / 08 / 2007
	Mailing Address 7143 E State St	Amount of Each Disbursement this Period 117.09
	City Rockford State IL Zip Code 61108-2694	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Expense - Festival of Lights	[MEMO ITEM] MEMO: EVENT EXPENSE - FESTIVAL OF LIGHTS
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo	Transaction ID: 71114.E12724 Date of Disbursement 11 / 14 / 2007
	Mailing Address 792 E. Lightsville Road	Amount of Each Disbursement this Period 247.80
	City Leaf River State IL Zip Code 61047-9449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Exp Rpt 11/14/07 See Below:	EXP RPT 11/14/07 SEE BELOW:
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	247.80
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address P.O. Box 66100 <hr/> City Amf Ohare State IL Zip Code 60666- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12725 Date of Disbursement 10 / 30 / 2007 <hr/> Amount of Each Disbursement this Period 247.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL EXPENSE
B.	Full Name (Last, First, Middle Initial) AIM Fund Services <hr/> Mailing Address PO Box 4739 <hr/> City Houston State TX Zip Code 77210-4739 <hr/> Purpose of Disbursement IRA Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12684 Date of Disbursement 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 164.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IRA CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Charlotte Cozart <hr/> Mailing Address 6194 Tudor Lane <hr/> City Loves Park State IL Zip Code 61111- <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12679 Date of Disbursement 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 307.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶	471.95
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Mool Law Firm, LLC

Transaction ID: 71114.E12723

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	7	

Mailing Address PO Box 8624

Amount of Each Disbursement this Period

825.00

City Springfield State IL Zip Code 62791-8624

Purpose of Disbursement
Legal Fees

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

LEGAL FEES

State: District:

B.

Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Transaction ID: 80112.E12872

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	8	

Mailing Address 1900 S. 18th Avenue

Amount of Each Disbursement this Period

1794.00

City West Bend State WI Zip Code 53095-8796

Purpose of Disbursement
Insurance

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

INSURANCE

State: District:

C.

Full Name (Last, First, Middle Initial)
Chase Card Services

Transaction ID: 71104.E12694

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	7	

Mailing Address Cardmember Service
PO Box 15153

Amount of Each Disbursement this Period

41.99

City Wilmington State DE Zip Code 19886-5153

Purpose of Disbursement
Credit Card 11/04/07 See Below:

Category/ Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

CREDIT CARD 11/04/07 SEE
BELOW:

State: District:

SUBTOTAL of Disbursements This Page (optional)

2660.99

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Cox Communications Mailing Address City State Zip Code Purpose of Disbursement Internet Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12698 Date of Disbursement 09 / 29 / 2007 Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: INTERNET EXPENSE
B.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City State Zip Code Wilmington DE 19886-5153 Purpose of Disbursement Credit Card 12/17/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12796 Date of Disbursement 12 / 17 / 2007 Amount of Each Disbursement this Period 2376.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 12/17/07 SEE BELOW:
C.	Full Name (Last, First, Middle Initial) Au Bon Pain Mailing Address 800 North Capitol St. City State Zip Code Washington DC 20005- Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12800 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 202.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2376.11

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Crains Chicago

Mailing Address 360 N. Michigan Avenue

City Chicago State IL Zip Code 60601-

Purpose of Disbursement
Subscription Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 71217.E12814
Date of Disbursement

^M 1	^M 2	/	^D 0	^D 3	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

99.00

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

[MEMO ITEM]
MEMO: SUBSCRIPTION EXPENSE

B.

Full Name (Last, First, Middle Initial)
FedEx Kinkos

Mailing Address 4315 E State

City Rockford State IL Zip Code 61108-

Purpose of Disbursement
Copy Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 71217.E12806
Date of Disbursement

^M 1	^M 1	/	^D 1	^D 6	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

49.03

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

[MEMO ITEM]
MEMO: COPY EXPENSE

C.

Full Name (Last, First, Middle Initial)
Forest View Storage

Mailing Address 11707 N. 2nd Street

City Loves Park State IL Zip Code 61111-

Purpose of Disbursement
Storage Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 71217.E12799
Date of Disbursement

^M 1	^M 1	/	^D 0	^D 9	/	^Y 2	^Y 0	^Y 0	^Y 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Amount of Each Disbursement this Period

65.00

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

[MEMO ITEM]
MEMO: STORAGE EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Home Depot	Transaction ID: 71217.E12805
	Mailing Address 6930 Argus Dr.	Date of Disbursement MM / DD / YYYY 11 / 16 / 2007
	City Rockford State IL Zip Code 61107-	Amount of Each Disbursement this Period 82.11
	Purpose of Disbursement Event 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	[MEMO ITEM] MEMO: EVENT EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Home Depot	Transaction ID: 71217.E12804
	Mailing Address 6930 Argus Dr.	Date of Disbursement MM / DD / YYYY 11 / 15 / 2007
	City Rockford State IL Zip Code 61107-	Amount of Each Disbursement this Period 7.11
	Purpose of Disbursement Event 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	[MEMO ITEM] MEMO: EVENT EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jimmy Johns	Transaction ID: 71217.E12808
	Mailing Address 3051 N Perryville Road	Date of Disbursement MM / DD / YYYY 11 / 19 / 2007
	City Rockford State IL Zip Code 61107-	Amount of Each Disbursement this Period 39.75
	Purpose of Disbursement Volunteer 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	[MEMO ITEM] MEMO: VOLUNTEER EXPENSE
	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)	

**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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

<p>A. Full Name (Last, First, Middle Initial) Jimmy Johns</p> <p>Mailing Address 3051 N Perryville Road</p> <p>City Rockford State IL Zip Code 61107-</p> <p>Purpose of Disbursement Volunteer 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71217.E12807 Date of Disbursement 11 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 53.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: VOLUNTEER EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) Johns Pizza</p> <p>Mailing Address 2914 11th St.</p> <p>City Rockford State IL Zip Code 61109-</p> <p>Purpose of Disbursement Event 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71217.E12813 Date of Disbursement 11 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 632.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: EVENT EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Liberty Self Storage</p> <p>Mailing Address 4114 176 East</p> <p>City Crystal Lake State IL Zip Code 60012-</p> <p>Purpose of Disbursement Storage 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71217.E12798 Date of Disbursement 11 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 85.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: STORAGE EXPENSE</p>

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 71217.E12803
	Mailing Address 5430 E State St	Date of Disbursement 12 / 05 / 2007
	City Rockford State IL Zip Code 61108-2380	Amount of Each Disbursement this Period 341.39
	Purpose of Disbursement Copy 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:	[MEMO ITEM] MEMO: COPY EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 71217.E12802
	Mailing Address 5430 E State St	Date of Disbursement 11 / 16 / 2007
	City Rockford State IL Zip Code 61108-2380	Amount of Each Disbursement this Period 21.63
	Purpose of Disbursement Copy 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:	[MEMO ITEM] MEMO: COPY EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Rock Valley Water	Transaction ID: 71217.E12811
	Mailing Address 702 N Madison	Date of Disbursement 11 / 27 / 2007
	City Rockford State IL Zip Code 61107-	Amount of Each Disbursement this Period 14.61
	Purpose of Disbursement Water 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:	[MEMO ITEM] MEMO: WATER EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rockford Register Star <hr/> Mailing Address 99 E State St <hr/> City Rockford State IL Zip Code 61104-1009 <hr/> Purpose of Disbursement Subscription Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12801 Date of Disbursement 11 / 12 / 2007 <hr/> Amount of Each Disbursement this Period 4.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SUBSCRIPTION EXPENSE
B.	Full Name (Last, First, Middle Initial) Stockholm Inn <hr/> Mailing Address 1422 20th <hr/> City Rockford State IL Zip Code 61104- <hr/> Purpose of Disbursement Event Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12809 Date of Disbursement 11 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 202.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE
C.	Full Name (Last, First, Middle Initial) Target <hr/> Mailing Address 6560 East State Street <hr/> City Rockford State IL Zip Code 61108- <hr/> Purpose of Disbursement Office Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12815 Date of Disbursement 12 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 63.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: 71217.E12810 Date of Disbursement 11 / 23 / 2007
	Mailing Address Lockbox 577	Amount of Each Disbursement this Period 20.74
	City Carol Stream State IL Zip Code 60132-0577	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	[MEMO ITEM] MEMO: POSTAGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: 71217.E12812 Date of Disbursement 11 / 29 / 2007
	Mailing Address Lockbox 577	Amount of Each Disbursement this Period 20.74
	City Carol Stream State IL Zip Code 60132-0577	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	[MEMO ITEM] MEMO: POSTAGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71217.E12816 Date of Disbursement 12 / 05 / 2007
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 106.75
	City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	[MEMO ITEM] MEMO: TELEPHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71217.E12817 Date of Disbursement 12 / 08 / 2007
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 125.87
	City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: TELEPHONE EXPENSE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Darlene Yock	Transaction ID: 71117.E12735 Date of Disbursement 11 / 23 / 2007
	Mailing Address 5074 Prairie Path	Amount of Each Disbursement this Period 241.44
	City Loves Park State IL Zip Code 61111-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	WAGES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Susan Bock	Transaction ID: 71018.E12618 Date of Disbursement 10 / 06 / 2007
	Mailing Address 6004 Smith Rd	Amount of Each Disbursement this Period 432.83
	City Crystal Lake State IL Zip Code 60014-4614	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mileage Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MILEAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	674.27
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Blue Cross/Blue Shield Mailing Address PO Box 2039 City Aurora State IL Zip Code 60507-2039 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80112.E12879 Date of Disbursement 01 / 12 / 2008 Amount of Each Disbursement this Period 700.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSURANCE
B.	Full Name (Last, First, Middle Initial) United Parcel Service Mailing Address Lockbox 577 City Carol Stream State IL Zip Code 60132-0577 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12838 Date of Disbursement 12 / 29 / 2007 Amount of Each Disbursement this Period 29.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
C.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12766 Date of Disbursement 12 / 07 / 2007 Amount of Each Disbursement this Period 1375.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

2106.10

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:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rita Versendaal	Transaction ID: 71104.E12708 Date of Disbursement 11 / 09 / 2007
	Mailing Address 1948 Wisteria Rd	Amount of Each Disbursement this Period 28.60
	City Rockford State IL Zip Code 61107-1583	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Larry Kobischka	Transaction ID: 71023.E12641 Date of Disbursement 10 / 20 / 2007
	Mailing Address 10469 Ray Drive	Amount of Each Disbursement this Period 1375.20
	City Roscoe State IL Zip Code 61073-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent (November 2007) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT (NOVEMBER 2007)

C.	Full Name (Last, First, Middle Initial) Amcore Bank	Transaction ID: 80105.E12870 Date of Disbursement 11 / 05 / 2007
	Mailing Address PO Box 1537	Amount of Each Disbursement this Period 37.50
	City Rockford State IL Zip Code 61110-0037	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement ACH Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		ACH EXPENSE

SUBTOTAL of Disbursements This Page (optional)	▶	1441.30
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Charlotte Cozart Mailing Address 6194 Tudor Lane City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12843 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 193.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Advanced Business Machines Mailing Address 5344 11th Street City Rockford State IL Zip Code 61109-3658 Purpose of Disbursement Office Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12751 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 71.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE EQUIPMENT RENTAL
C.	Full Name (Last, First, Middle Initial) Frank Sexton Mailing Address 20404 St. Barth Court City Marengo State IL Zip Code 60152- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71117.E12736 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 183.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶	447.34
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo <hr/> Mailing Address 792 E. Lightsville Road <hr/> City Leaf River State IL Zip Code 61047-9449 <hr/> Purpose of Disbursement Phone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12854 Date of Disbursement 01 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 52.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE EXPENSE
B.	Full Name (Last, First, Middle Initial) Darlene Yock <hr/> Mailing Address 5074 Prairie Path <hr/> City Loves Park State IL Zip Code 61111- <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12681 Date of Disbursement 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 280.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address Cardmember Service PO Box 15153 <hr/> City Wilmington State DE Zip Code 19886-5153 <hr/> Purpose of Disbursement Credit Card 10/20/07 See Below: Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12676 Date of Disbursement 10 / 20 / 2007 <hr/> Amount of Each Disbursement this Period 4370.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 10/20/07 SEE BELOW:

SUBTOTAL of Disbursements This Page (optional) ▶	4704.14
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Forest View Storage <hr/> Mailing Address 11707 N. 2nd Street <hr/> City Loves Park State IL Zip Code 61111- <hr/> Purpose of Disbursement Storage Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12655 Date of Disbursement 09 / 09 / 2007 <hr/> Amount of Each Disbursement this Period 65.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: STORAGE EXPENSE
B.	Full Name (Last, First, Middle Initial) Intuit Quick Payroll <hr/> Mailing Address 2632 Marine Way <hr/> City Mountain View State CA Zip Code 94043- <hr/> Purpose of Disbursement Software Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12671 Date of Disbursement 09 / 25 / 2007 <hr/> Amount of Each Disbursement this Period 137.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SOFTWARE EXPENSE
C.	Full Name (Last, First, Middle Initial) Jimmy Johns <hr/> Mailing Address 3051 N Perryville Road <hr/> City Rockford State IL Zip Code 61107- <hr/> Purpose of Disbursement Volunteer Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12664 Date of Disbursement 09 / 19 / 2007 <hr/> Amount of Each Disbursement this Period 51.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: VOLUNTEER EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Johnnys Charhouse Mailing Address City State Zip Code Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12667 Date of Disbursement 09 / 21 / 2007 Amount of Each Disbursement this Period 265.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE
B.	Full Name (Last, First, Middle Initial) Kroger Mailing Address 1715 Rural Street City State Zip Code Rockford IL 61107- Purpose of Disbursement Volunteer Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12665 Date of Disbursement 09 / 19 / 2007 Amount of Each Disbursement this Period 43.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: VOLUNTEER EXPENSE
C.	Full Name (Last, First, Middle Initial) Liberty Self Storage Mailing Address 4114 176 East City State Zip Code Crystal Lake IL 60012- Purpose of Disbursement Storage Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12658 Date of Disbursement 09 / 10 / 2007 Amount of Each Disbursement this Period 85.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: STORAGE EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Linus Restaurant	Transaction ID: 71023.E12670 Date of Disbursement 09 / 23 / 2007
	Mailing Address 5611 E State St	Amount of Each Disbursement this Period 256.04
	City Rockford State IL Zip Code 61108-2424	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Expense	[MEMO ITEM] MEMO: EVENT EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Manufacturers News	Transaction ID: 71023.E12660 Date of Disbursement 09 / 13 / 2007
	Mailing Address 1633 Central Street	Amount of Each Disbursement this Period 521.95
	City Evanston State IL Zip Code 60201-1569	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement List Procurement	[MEMO ITEM] MEMO: LIST PROCUREMENT
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 71023.E12673 Date of Disbursement 09 / 27 / 2007
	Mailing Address 5430 E State St	Amount of Each Disbursement this Period 180.00
	City Rockford State IL Zip Code 61108-2380	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Copy Expense	[MEMO ITEM] MEMO: COPY EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial) Office Depot Mailing Address 5430 E State St City Rockford State IL Zip Code 61108-2380 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12666 Date of Disbursement 09 / 19 / 2007
	Amount of Each Disbursement this Period 281.60
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: OFFICE EXPENSE

B. Full Name (Last, First, Middle Initial) Old Europe Restaurant Mailing Address 2434 Wisconsin Ave NW City Washington State DC Zip Code 20007- Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12672 Date of Disbursement 09 / 26 / 2007
	Amount of Each Disbursement this Period 643.30
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: EVENT EXPENSE

C. Full Name (Last, First, Middle Initial) Rock Valley Water Mailing Address 702 N Madison City Rockford State IL Zip Code 61107- Purpose of Disbursement Water Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12669 Date of Disbursement 09 / 24 / 2007
	Amount of Each Disbursement this Period 21.01
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	[MEMO ITEM] MEMO: WATER EXPENSE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rockford Register Star Mailing Address 99 E State St City Rockford State IL Zip Code 61104-1009 Purpose of Disbursement Subscription Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12657 Date of Disbursement 09 / 10 / 2007 Amount of Each Disbursement this Period 4.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SUBSCRIPTION EXPENSE
B.	Full Name (Last, First, Middle Initial) Stockholm Inn Mailing Address 1422 20th City Rockford State IL Zip Code 61104- Purpose of Disbursement Event Expense -Food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12668 Date of Disbursement 09 / 21 / 2007 Amount of Each Disbursement this Period 354.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE -FOOD
C.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 5225 Harrison Avenue City Rockford State IL Zip Code 61125-9300 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12662 Date of Disbursement 09 / 18 / 2007 Amount of Each Disbursement this Period 410.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: POSTAGE

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: 71023.E12663 Date of Disbursement 09 / 26 / 2007
	Mailing Address 5225 Harrison Avenue	Amount of Each Disbursement this Period 820.00
	City Rockford State IL Zip Code 61125-9300	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	[MEMO ITEM] MEMO: POSTAGE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71023.E12675 Date of Disbursement 10 / 08 / 2007
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 125.92
	City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	[MEMO ITEM] MEMO: TELEPHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 71023.E12674 Date of Disbursement 10 / 05 / 2007
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 105.08
	City Dallas State TX Zip Code 75266-0108	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Telephone Expense Candidate Name	[MEMO ITEM] MEMO: TELEPHONE EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Frank Sexton Mailing Address 20404 St. Barth Court City Marengo State IL Zip Code 60152- Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12797 Date of Disbursement 12 / 17 / 2007 Amount of Each Disbursement this Period 79.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MILEAGE
B.	Full Name (Last, First, Middle Initial) Frank Sexton Mailing Address 20404 St. Barth Court City Marengo State IL Zip Code 60152- Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12867 Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 20.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE EXPENSE
C.	Full Name (Last, First, Middle Initial) Insight Communications Mailing Address PO Box 740273 City Cincinnati State OH Zip Code 45274-0273 Purpose of Disbursement Internet Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12635 Date of Disbursement 10 / 13 / 2007 Amount of Each Disbursement this Period 153.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INTERNET EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	253.50
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Hammond & Associates	Transaction ID: 71023.E12649 Date of Disbursement 10 / 20 / 2007
	Mailing Address PO Box 368	Amount of Each Disbursement this Period 2768.95
	City Falls Church State VA Zip Code 22040- Purpose of Disbursement Fundraising Consulting Fee Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING CONSULTING FEE

B.	Full Name (Last, First, Middle Initial) Susan Bock	Transaction ID: 71217.E12819 Date of Disbursement 12 / 17 / 2007
	Mailing Address 6004 Smith Rd	Amount of Each Disbursement this Period 48.50
	City Crystal Lake State IL Zip Code 60014-4614 Purpose of Disbursement Mileage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MILEAGE

C.	Full Name (Last, First, Middle Initial) Advanced Business Machines	Transaction ID: 71026.E12687 Date of Disbursement 10 / 26 / 2007
	Mailing Address 5344 11th Street	Amount of Each Disbursement this Period 71.00
	City Rockford State IL Zip Code 61109-3658 Purpose of Disbursement Office Equipment Rental Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	OFFICE EQUIPMENT RENTAL

SUBTOTAL of Disbursements This Page (optional)	▶	2888.45
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12833 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 1713.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Exp Rpt 01/12/08 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80112.E12882 Date of Disbursement 01 / 12 / 2008 Amount of Each Disbursement this Period 179.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 01/12/08 SEE BELOW:
C.	Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box 66100 City Amf Ohare State IL Zip Code 60666- Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80112.E12883 Date of Disbursement 01 / 10 / 2008 Amount of Each Disbursement this Period 179.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	1892.76
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rita Versendaal	Transaction ID: 71117.E12739
	Mailing Address 1948 Wisteria Rd	Date of Disbursement MM / DD / YYYY 11 / 23 / 2007
	City Rockford State IL Zip Code 61107-1583	Amount of Each Disbursement this Period 42.88
	Purpose of Disbursement Wages	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Susan Bock	Transaction ID: 71201.E12770
	Mailing Address 6004 Smith Rd	Date of Disbursement MM / DD / YYYY 12 / 07 / 2007
	City Crystal Lake State IL Zip Code 60014-4614	Amount of Each Disbursement this Period 222.37
	Purpose of Disbursement Wages	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 80103.E12852
	Mailing Address Electronic Federal Tax Payment Sys	Date of Disbursement MM / DD / YYYY 01 / 03 / 2008
	City Washington State DC Zip Code	Amount of Each Disbursement this Period 2191.99
	Purpose of Disbursement Federal Tax Expense	<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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEDERAL TAX EXPENSE

SUBTOTAL of Disbursements This Page (optional)	▶	2457.24
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Darlene Yock Mailing Address 5074 Prairie Path City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12627 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 263.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Frank Sexton Mailing Address 20404 St. Barth Court City Marengo State IL Zip Code 60152- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12765 Date of Disbursement 12 / 07 / 2007 Amount of Each Disbursement this Period 183.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Blue Cross/Blue Shield Mailing Address PO Box 2039 City Aurora State IL Zip Code 60507-2039 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12727 Date of Disbursement 11 / 14 / 2007 Amount of Each Disbursement this Period 700.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSURANCE

SUBTOTAL of Disbursements This Page (optional) ▶

1147.24

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Intuit Quick Payroll Mailing Address 2632 Marine Way City Mountain View State CA Zip Code 94043- Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12755 Date of Disbursement 12 / 01 / 2007 Amount of Each Disbursement this Period 97.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE EXPENSE
B.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Exp Rpt 10/20/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12650 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 114.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 10/20/07 SEE BELOW:
C.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12651 Date of Disbursement 10 / 19 / 2007 Amount of Each Disbursement this Period 96.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MILEAGE

SUBTOTAL of Disbursements This Page (optional) ▶

212.33

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Insight Communications Mailing Address PO Box 740273 City Cincinnati State OH Zip Code 45274-0273 Purpose of Disbursement Internet Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12721 Date of Disbursement 11 / 14 / 2007 Amount of Each Disbursement this Period 153.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INTERNET EXPENSE
B.	Full Name (Last, First, Middle Initial) Advanced Business Machines Mailing Address 5344 11th Street City Rockford State IL Zip Code 61109-3658 Purpose of Disbursement Office Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12599 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 71.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE EQUIPMENT RENTAL
C.	Full Name (Last, First, Middle Initial) Rockford Symphony Orchestra Mailing Address 711 North Main Street City Rockford State IL Zip Code 61103-7204 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12712 Date of Disbursement 10 / 17 / 2007 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶

1224.51

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Darlene Yock Mailing Address 5074 Prairie Path City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12831 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 295.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Mid-City Office Products Mailing Address PO Box 957 City Rockford State IL Zip Code 61105-0957 Purpose of Disbursement Paper Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12637 Date of Disbursement 10 / 13 / 2007 Amount of Each Disbursement this Period 36.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAPER EXPENSE
C.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Exp Rpt 12/18/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12825 Date of Disbursement 12 / 18 / 2007 Amount of Each Disbursement this Period 148.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 12/18/07 SEE BELO- W:

SUBTOTAL of Disbursements This Page (optional) ▶	480.86
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) AIM Fund Services Mailing Address PO Box 4739 City Houston State TX Zip Code 77210-4739 Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12848 Date of Disbursement 01 / 04 / 2008 Amount of Each Disbursement this Period 164.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IRA CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Aristotle Publishing Mailing Address 205 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1164 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80114.E12890 Date of Disbursement 01 / 14 / 2008 Amount of Each Disbursement this Period 464.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD PROCESSING FEE
C.	Full Name (Last, First, Middle Initial) Rockford Area Chamber of Commerce Mailing Address 308 W. State Street, Suite 190 City Rockford State IL Zip Code 61101- Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12856 Date of Disbursement 01 / 03 / 2008 Amount of Each Disbursement this Period 75.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

703.25

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Charlotte Cozart

Mailing Address 6194 Tudor Lane

City Loves Park State IL Zip Code 61111-

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 71219.E12830
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	7	7

Amount of Each Disbursement this Period

592.90

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

WAGES

B.

Full Name (Last, First, Middle Initial)
Katherine Manzullo

Mailing Address 792 E Lightsville Rd

City Leaf River State IL Zip Code 61047-9449

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 71201.E12768
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	7	/	2	0	7	7

Amount of Each Disbursement this Period

71.48

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

WAGES

C.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address Lockbox 577

City Carol Stream State IL Zip Code 60132-0577

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 71018.E12636
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	7	7

Amount of Each Disbursement this Period

15.05

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

POSTAGE

SUBTOTAL of Disbursements This Page (optional)

679.43

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Mid-City Office Products

Mailing Address PO Box 957

City State Zip Code
Rockford IL 61105-0957

Purpose of Disbursement
Voided ck

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71018.E12634
Date of Disbursement

10 / 13 / 2007

Amount of Each Disbursement this Period

0.00

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

VOIDED CK

B.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Mailing Address 792 E. Lightsville Road

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement
Phone Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71026.E12688
Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

52.50

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

PHONE EXPENSE

C.

Full Name (Last, First, Middle Initial)
Susan Bock

Mailing Address 6004 Smith Rd

City State Zip Code
Crystal Lake IL 60014-4614

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71018.E12631
Date of Disbursement

10 / 12 / 2007

Amount of Each Disbursement this Period

222.37

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

WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

274.87

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo	Transaction ID: 71201.E12754 Date of Disbursement 12 / 01 / 2007
	Mailing Address 792 E. Lightsville Road	Amount of Each Disbursement this Period 282.80
	City Leaf River State IL Zip Code 61047-9449	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Exp Rpt 12/01/07 See Below:	EXP RPT 12/01/07 SEE BELOW:
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: 71201.E12753 Date of Disbursement 11 / 27 / 2007
	Mailing Address P.O. Box 66100	Amount of Each Disbursement this Period 282.80
	City Amf Ohare State IL Zip Code 60666-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense	[MEMO ITEM] MEMO: TRAVEL EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Rock Valley Publishing	Transaction ID: 71201.E12750 Date of Disbursement 12 / 01 / 2007
	Mailing Address 11512 North Second Street	Amount of Each Disbursement this Period 38.00
	City Machesney Park State IL Zip Code 61115-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Expense	ADVERTISING EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	320.80
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Frank Sexton

Transaction ID: 71018.E12628
Date of Disbursement

Mailing Address 20404 St. Barth Court

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	7	

City Marengo State IL Zip Code 60152-

Amount of Each Disbursement this Period

183.32

Purpose of Disbursement
Wages

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

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

WAGES

State: District:

B.

Full Name (Last, First, Middle Initial)
Frank Sexton

Transaction ID: 71104.E12707
Date of Disbursement

Mailing Address 20404 St. Barth Court

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	7	

City Marengo State IL Zip Code 60152-

Amount of Each Disbursement this Period

183.32

Purpose of Disbursement
Wages

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

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

WAGES

State: District:

C.

Full Name (Last, First, Middle Initial)
Charlotte Cozart

Transaction ID: 71117.E12734
Date of Disbursement

Mailing Address 6194 Tudor Lane

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	7	

City Loves Park State IL Zip Code 61111-

Amount of Each Disbursement this Period

411.00

Purpose of Disbursement
Wages

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

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

WAGES

State: District:

SUBTOTAL of Disbursements This Page (optional)

777.64

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) AIM Fund Services Mailing Address PO Box 4739 City Houston State TX Zip Code 77210-4739 Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12711 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 164.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IRA CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Susan Bock Mailing Address 6004 Smith Rd City Crystal Lake State IL Zip Code 60014-4614 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12835 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 446.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Susan Bock Mailing Address 6004 Smith Rd City Crystal Lake State IL Zip Code 60014-4614 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12709 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 222.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

832.71

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 100 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Liberty Mutual Insurance <hr/> Mailing Address 75 Remittance Dr., Suite 1837 <hr/> City Chicago State IL Zip Code 60675-1837 <hr/> Purpose of Disbursement Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12853 Date of Disbursement 01 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 1680.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INSURANCE
B.	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address Cardmember Service PO Box 15153 <hr/> City Wilmington State DE Zip Code 19886-5153 <hr/> Purpose of Disbursement Credit Card 01/05/08 See Below: Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12865 Date of Disbursement 01 / 05 / 2008 <hr/> Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 01/05/08 SEE BELOW:
C.	Full Name (Last, First, Middle Initial) Cox Communications <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Internet Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12866 Date of Disbursement 11 / 29 / 2007 <hr/> Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: INTERNET EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	1721.99
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 101 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Julie Yock

Mailing Address 326 N. Chicago Ave.

City State Zip Code
Rockford IL 61107-4406

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71117.E12737
Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

1375.67

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

WAGES

B.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Mailing Address 792 E. Lightsville Road

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement
Phone Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71201.E12748
Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

52.50

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

PHONE EXPENSE

C.

Full Name (Last, First, Middle Initial)
Larry Kobischka

Mailing Address 10469 Ray Drive

City State Zip Code
Roscoe IL 61073-

Purpose of Disbursement
Rent (December 2007)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71117.E12741
Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

1375.20

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

RENT (DECEMBER 2007)

SUBTOTAL of Disbursements This Page (optional) ▶

2803.37

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 102 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Transaction ID: 71023.E12645

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	0	7

Mailing Address 792 E. Lightsville Road

Amount of Each Disbursement this Period

157.14

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement

Mileage

Candidate Name

Category/
Type

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

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

MILEAGE

State: District:

B.

Full Name (Last, First, Middle Initial)
AIM Fund Services

Transaction ID: 71201.E12767

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	7

Mailing Address PO Box 4739

Amount of Each Disbursement this Period

164.25

City State Zip Code
Houston TX 77210-4739

Purpose of Disbursement

IRA Contribution

Candidate Name

Category/
Type

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

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

IRA CONTRIBUTION

State: District:

C.

Full Name (Last, First, Middle Initial)
Hammond & Associates

Transaction ID: 71219.E12829

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Mailing Address PO Box 368

Amount of Each Disbursement this Period

2616.58

City State Zip Code
Falls Church VA 22040-

Purpose of Disbursement

Fundraising Consulting Fee

Candidate Name

Category/
Type

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

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

FUNDRAISING CONSULTING FEE

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2937.97

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 5225 Harrison Avenue City Rockford State IL Zip Code 61125-9300 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80112.E12871 Date of Disbursement 01 / 12 / 2008 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
B.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Exp Rpt 10/06/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12611 Date of Disbursement 10 / 06 / 2007 Amount of Each Disbursement this Period 247.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 10/06/07 SEE BELOW:
C.	Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box 66100 City Amf Ohare State IL Zip Code 60666- Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12612 Date of Disbursement 10 / 05 / 2007 Amount of Each Disbursement this Period 247.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	447.80
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Susan Bock

Transaction ID: 80103.E12847
Date of Disbursement

Mailing Address 6004 Smith Rd

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

City State Zip Code
Crystal Lake IL 60014-4614

Amount of Each Disbursement this Period

222.37

Purpose of Disbursement
Wages

Category/ Type

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

Candidate Name

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

WAGES

State: District:

B.

Full Name (Last, First, Middle Initial)
Julie Yock

Transaction ID: 71018.E12629
Date of Disbursement

Mailing Address 326 N. Chicago Ave.

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	0	7

City State Zip Code
Rockford IL 61107-4406

Amount of Each Disbursement this Period

1375.67

Purpose of Disbursement
Wages

Category/ Type

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

Candidate Name

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

WAGES

State: District:

C.

Full Name (Last, First, Middle Initial)
Julie Yock

Transaction ID: 80103.E12839
Date of Disbursement

Mailing Address 326 N. Chicago Ave.

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	0	7

City State Zip Code
Rockford IL 61107-4406

Amount of Each Disbursement this Period

157.77

Purpose of Disbursement
Mileage

Category/ Type

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

Candidate Name

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

MILEAGE

State: District:

SUBTOTAL of Disbursements This Page (optional)

1755.81

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 105 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 8100 City Aurora State IL Zip Code 60507-8100 Purpose of Disbursement Phone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71018.E12633 Date of Disbursement 10 / 13 / 2007 Amount of Each Disbursement this Period 97.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PHONE EXPENSE
B.	Full Name (Last, First, Middle Initial) AIM Fund Services Mailing Address PO Box 4739 City Houston State TX Zip Code 77210-4739 Purpose of Disbursement IRA Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71117.E12738 Date of Disbursement 11 / 23 / 2007 Amount of Each Disbursement this Period 164.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IRA CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Larry Kobischka Mailing Address 10469 Ray Drive City Roscoe State IL Zip Code 61073- Purpose of Disbursement Rent (October 2007) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71023.E12640 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 1375.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT (OCTOBER 2007)

SUBTOTAL of Disbursements This Page (optional)	1636.92
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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

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

Mailing Address 5225 Harrison Avenue

City State Zip Code
Rockford IL 61125-9300

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80103.E12860

Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

175.00

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

POSTAGE

B.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Mailing Address 792 E. Lightsville Road

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement
Exp Rpt 11/04/07 See Below:

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71104.E12695

Date of Disbursement

11 / 04 / 2007

Amount of Each Disbursement this Period

100.00

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

EXP RPT 11/04/07 SEE BELOW:

C.

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

Mailing Address P.O. Box 66100

City State Zip Code
Amf Ohare IL 60666-

Purpose of Disbursement
Travel Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71104.E12699

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

100.00

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

[MEMO ITEM]
MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

275.00

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AIM Fund Services</p> <p>Mailing Address PO Box 4739</p> <p>City Houston State TX Zip Code 77210-4739</p> <p>Purpose of Disbursement IRA Contribution</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71219.E12836</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 164.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>IRA CONTRIBUTION</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AIM Fund Services</p> <p>Mailing Address PO Box 4739</p> <p>City Houston State TX Zip Code 77210-4739</p> <p>Purpose of Disbursement IRA Contribution</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71018.E12632</p> <p>Date of Disbursement 10 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 164.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>IRA CONTRIBUTION</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frank Sexton</p> <p>Mailing Address 20404 St. Barth Court</p> <p>City Marengo State IL Zip Code 60152-</p> <p>Purpose of Disbursement Wages</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71023.E12682</p> <p>Date of Disbursement 10 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 183.32</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>WAGES</p>

SUBTOTAL of Disbursements This Page (optional)	511.82
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 660108 City Dallas State TX Zip Code 75266-0108 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12644 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 174.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE EXPENSE	
B.	Full Name (Last, First, Middle Initial) Rockford Park District Foundation Mailing Address 401 S Main St, Ste 102 City Rockford State IL Zip Code 61101-1321 Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12624 Date of Disbursement 10 / 06 / 2007 Amount of Each Disbursement this Period 7920.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EVENT EXPENSE	
C.	Full Name (Last, First, Middle Initial) Frank Sexton Mailing Address 20404 St. Barth Court City Marengo State IL Zip Code 60152- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12832 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 295.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES	

SUBTOTAL of Disbursements This Page (optional) ▶	8389.80
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Susan Bock

Mailing Address 6004 Smith Rd

City State Zip Code
Crystal Lake IL 60014-4614

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71023.E12685
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

WAGES

B.

Full Name (Last, First, Middle Initial)
Julie Yock

Mailing Address 326 N. Chicago Ave.

City State Zip Code
Rockford IL 61107-4406

Purpose of Disbursement
Exp Rpt 11/14/07 See Below:

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71114.E12718
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

EXP RPT 11/14/07 SEE BELOW:

C.

Full Name (Last, First, Middle Initial)
Julie Yock

Mailing Address 326 N. Chicago Ave.

City State Zip Code
Rockford IL 61107-4406

Purpose of Disbursement
Mileage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71114.E12719
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO: MILEAGE

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Kohls Mailing Address City State Zip Code Rockford IL 61108- Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12720 Date of Disbursement 11 / 13 / 2007 Amount of Each Disbursement this Period 114.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: OFFICE EXPENSE
B.	Full Name (Last, First, Middle Initial) United States Treasury Mailing Address Electronic Federal Tax Payment Sys City State Zip Code Washington DC Purpose of Disbursement Federal Tax Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12794 Date of Disbursement 10 / 04 / 2007 Amount of Each Disbursement this Period 1269.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FEDERAL TAX EXPENSE
C.	Full Name (Last, First, Middle Initial) Susan Bock Mailing Address 6004 Smith Rd City State Zip Code Crystal Lake IL 60014-4614 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71117.E12740 Date of Disbursement 11 / 23 / 2007 Amount of Each Disbursement this Period 222.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

1491.74

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rita Versendaal Mailing Address 1948 Wisteria Rd City Rockford State IL Zip Code 61107-1583 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12769 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 7 Amount of Each Disbursement this Period 28.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 660108 City Dallas State TX Zip Code 75266-0108 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12722 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7 Amount of Each Disbursement this Period 174.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE EXPENSE
C.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement Credit Card 12/08/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12788 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 12/08/07 SEE BELOW:

SUBTOTAL of Disbursements This Page (optional) ▶

245.21

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Cox Communications Mailing Address City State Zip Code Purpose of Disbursement Internet Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12789 Date of Disbursement 10 / 28 / 2007 Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: INTERNET EXPENSE
B.	Full Name (Last, First, Middle Initial) Charlotte Cozart Mailing Address 6194 Tudor Lane City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12626 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 424.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12864 Date of Disbursement 01 / 05 / 2008 Amount of Each Disbursement this Period 45.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	469.07
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

<p>A. Full Name (Last, First, Middle Initial) Aristotle Publishing</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Credit Card Processing Fee</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80105.E12862</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 4.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CREDIT CARD PROCESSING FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Kohls</p> <p>Mailing Address</p> <p>City Rockford State IL Zip Code 61108-</p> <p>Purpose of Disbursement Office 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80103.E12842</p> <p>Date of Disbursement 12 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 113.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>OFFICE EXPENSE</p>
<p>C. Full Name (Last, First, Middle Initial) Amcore Bank</p> <p>Mailing Address PO Box 1537</p> <p>City Rockford State IL Zip Code 61110-0037</p> <p>Purpose of Disbursement ACH 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80105.E12868</p> <p>Date of Disbursement 12 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 37.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>ACH EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

155.69

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement Credit Card 10/01/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12597 Date of Disbursement <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>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>141.96</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 10/01/07 SEE BELOW:	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0	7	141.96
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	1	/	2	0	0	7														
141.96																							
B.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement Credit Card 11/04/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12693 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>144.98</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 11/04/07 SEE BELOW:	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	7	144.98
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	4	/	2	0	0	7														
144.98																							
C.	Full Name (Last, First, Middle Initial) Amazon.com Mailing Address 1200 12th Avenue South City Seattle State WA Zip Code 98144- Purpose of Disbursement Computer Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12696 Date of Disbursement <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>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>127.98</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: COMPUTER EXPENSE	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	0	7	127.98
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	5	/	2	0	0	7														
127.98																							

SUBTOTAL of Disbursements This Page (optional) ▶

286.94

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Hammond & Associates Mailing Address PO Box 368 City Falls Church State VA Zip Code 22040- Purpose of Disbursement Fundraising Consulting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12749 Date of Disbursement 12 / 01 / 2007 Amount of Each Disbursement this Period 2799.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING CONSULTING FEE
B.	Full Name (Last, First, Middle Initial) Charlotte Cozart Mailing Address 6194 Tudor Lane City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12706 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 370.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Exp Rpt 10/01/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12587 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 592.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 10/01/07 SEE BELO- W:

SUBTOTAL of Disbursements This Page (optional) ▶	3762.38
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Mailing Address 792 E. Lightsville Road

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement
Phone Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 71004.E12590
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	7	7

Amount of Each Disbursement this Period

52.50

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

[MEMO ITEM]
MEMO: PHONE EXPENSE

B.

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

Mailing Address P.O. Box 66100

City State Zip Code
Amf Ohare IL 60666-

Purpose of Disbursement
Travel Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 71004.E12591
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	7	7

Amount of Each Disbursement this Period

539.80

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

[MEMO ITEM]
MEMO: TRAVEL EXPENSE

C.

Full Name (Last, First, Middle Initial)
Jim Thacker

Mailing Address 422 S. 1st Street

City State Zip Code
Rockford IL 61104-

Purpose of Disbursement
Consulting Fee
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 71113.E12715
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	7	7

Amount of Each Disbursement this Period

2000.00

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

CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional)

2000.00

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

<p>A. Full Name (Last, First, Middle Initial) Congressional Club</p> <p>Mailing Address 2001 New Hampshire Ave NW</p> <p>City Washington State DC Zip Code 20009-3414</p> <p>Purpose of Disbursement Cookbooks</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71004.E12601 Date of Disbursement 10 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 977.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>COOKBOOKS</p>
<p>B. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address Lockbox 577</p> <p>City Carol Stream State IL Zip Code 60132-0577</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 71026.E12690 Date of Disbursement 10 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 15.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>POSTAGE</p>
<p>C. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address Lockbox 577</p> <p>City Carol Stream State IL Zip Code 60132-0577</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80112.E12878 Date of Disbursement 01 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 17.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>POSTAGE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1010.37

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office <hr/> Mailing Address 5225 Harrison Avenue <hr/> City Rockford State IL Zip Code 61125-9300 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71026.E12689 Date of Disbursement 10 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE
B.	Full Name (Last, First, Middle Initial) Julie Yock <hr/> Mailing Address 326 N. Chicago Ave. <hr/> City Rockford State IL Zip Code 61107-4406 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12704 Date of Disbursement 11 / 09 / 2007 <hr/> Amount of Each Disbursement this Period 1375.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
C.	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address Cardmember Service PO Box 15153 <hr/> City Wilmington State DE Zip Code 19886-5153 <hr/> Purpose of Disbursement Credit Card 10/06/07 See Below: Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12617 Date of Disbursement 10 / 06 / 2007 <hr/> Amount of Each Disbursement this Period 41.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 10/06/07 SEE BELOW:

SUBTOTAL of Disbursements This Page (optional) ▶	1717.66
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Cox Communications

Mailing Address

City State Zip Code

Purpose of Disbursement
Internet Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 71018.E12616
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	7	7

Amount of Each Disbursement this Period

41.99

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

[MEMO ITEM]

MEMO: INTERNET EXPENSE

B.

Full Name (Last, First, Middle Initial)
Charlotte Cozart

Mailing Address 6194 Tudor Lane

City State Zip Code
Loves Park IL 61111-

Purpose of Disbursement
Mileage
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 80103.E12841
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	7	7

Amount of Each Disbursement this Period

22.80

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

MILEAGE

C.

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

Mailing Address PO Box 8100

City State Zip Code
Aurora IL 60507-8100

Purpose of Disbursement
Phone Expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 71117.E12733
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	7	7

Amount of Each Disbursement this Period

112.58

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

PHONE EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

135.38

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Mid-City Office Products Mailing Address PO Box 957 City Rockford State IL Zip Code 61105-0957 Purpose of Disbursement Paper Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12600 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 36.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAPER EXPENSE
B.	Full Name (Last, First, Middle Initial) Aristotle Publishing Mailing Address 205 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1164 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12863 Date of Disbursement 11 / 28 / 2007 Amount of Each Disbursement this Period 202.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD PROCESSING FEE
C.	Full Name (Last, First, Middle Initial) Amcore Bank Mailing Address PO Box 1537 City Rockford State IL Zip Code 61110-0037 Purpose of Disbursement ACH Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12793 Date of Disbursement 10 / 03 / 2007 Amount of Each Disbursement this Period 37.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ACH EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

275.65

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12683 Date of Disbursement 10 / 26 / 2007 Amount of Each Disbursement this Period 1375.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Jim Thacker Mailing Address 422 S. 1st Street City Rockford State IL Zip Code 61104- Purpose of Disbursement Consulting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12648 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONSULTING FEE
C.	Full Name (Last, First, Middle Initial) Mid-City Office Products Mailing Address PO Box 957 City Rockford State IL Zip Code 61105-0957 Purpose of Disbursement Paper Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12622 Date of Disbursement 10 / 06 / 2007 Amount of Each Disbursement this Period 405.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PAPER EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2181.62

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12845 Date of Disbursement 01 / 04 / 2008 Amount of Each Disbursement this Period 1378.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Illinois Department of Revenue Mailing Address PO Box 19434 City Springfield State IL Zip Code 62794-9434 Purpose of Disbursement State Withholding Tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12713 Date of Disbursement 10 / 23 / 2007 Amount of Each Disbursement this Period 672.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 STATE WITHHOLDING TAX
C.	Full Name (Last, First, Middle Initial) Rockford Symphony Orchestra Mailing Address 711 North Main Street City Rockford State IL Zip Code 61103-7204 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12677 Date of Disbursement 10 / 22 / 2007 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	2551.34
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Darlene Yock Mailing Address 5074 Prairie Path City Loves Park State IL Zip Code 61111- Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12764 Date of Disbursement 12 / 07 / 2007 Amount of Each Disbursement this Period 108.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 660108 City Dallas State TX Zip Code 75266-0108 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12828 Date of Disbursement 12 / 18 / 2007 Amount of Each Disbursement this Period 174.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE EXPENSE
C.	Full Name (Last, First, Middle Initial) Rita Versendaal Mailing Address 1948 Wisteria Rd City Rockford State IL Zip Code 61107-1583 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71018.E12630 Date of Disbursement 10 / 12 / 2007 Amount of Each Disbursement this Period 28.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

311.82

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 125 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Jim Thacker Mailing Address 422 S. 1st Street City Rockford State IL Zip Code 61104- Purpose of Disbursement Consulting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12840 Date of Disbursement 12 / 29 / 2007 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONSULTING FEE
B.	Full Name (Last, First, Middle Initial) Congressman Don Manzullo Mailing Address 792 E. Lightsville Road City Leaf River State IL Zip Code 61047-9449 Purpose of Disbursement Void Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12589 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 0.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 VOID
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Meal Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12642 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 789.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MEAL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2789.20

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 126 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Julie Yock <hr/> Mailing Address 326 N. Chicago Ave. <hr/> City Rockford State IL Zip Code 61107-4406 <hr/> Purpose of Disbursement Exp Rpt 12/01/07 See Below: Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12756 Date of Disbursement <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>1</td><td>2</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>199.02</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 12/01/07 SEE BELOW:	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	1	/	2	0	0	7	199.02
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	0	1	/	2	0	0	7														
199.02																							
B.	Full Name (Last, First, Middle Initial) Julie Yock <hr/> Mailing Address 326 N. Chicago Ave. <hr/> City Rockford State IL Zip Code 61107-4406 <hr/> Purpose of Disbursement Mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12757 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>184.30</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MILEAGE	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	8	/	2	0	0	7	184.30
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	8	/	2	0	0	7														
184.30																							
C.	Full Name (Last, First, Middle Initial) Target <hr/> Mailing Address 6560 East State Street <hr/> City Rockford State IL Zip Code 61108- <hr/> Purpose of Disbursement Event Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12758 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.92</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT EXPENSE	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	0	7	10.92
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	5	/	2	0	0	7														
10.92																							

SUBTOTAL of Disbursements This Page (optional) ►

199.02

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 127 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Jim Thacker Mailing Address 422 S. 1st Street City Rockford State IL Zip Code 61104- Purpose of Disbursement Consulting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71201.E12742 Date of Disbursement 11 / 21 / 2007 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONSULTING FEE
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE City Washington State DC Zip Code 20003-1801 Purpose of Disbursement Meal Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12593 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 739.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MEAL EXPENSE
C.	Full Name (Last, First, Middle Initial) Amcore Bank Mailing Address PO Box 1537 City Rockford State IL Zip Code 61110-0037 Purpose of Disbursement ACH Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80105.E12869 Date of Disbursement 11 / 05 / 2007 Amount of Each Disbursement this Period 14.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ACH EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

2753.95

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 128 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Cardmember Service PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement Credit Card 01/03/08 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12858 Date of Disbursement 01 / 03 / 2008 Amount of Each Disbursement this Period 17.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD 01/03/08 SEE BELOW:
B.	Full Name (Last, First, Middle Initial) Julie Yock Mailing Address 326 N. Chicago Ave. City Rockford State IL Zip Code 61107-4406 Purpose of Disbursement Exp Rpt 11/04/07 See Below: Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71104.E12700 Date of Disbursement 11 / 04 / 2007 Amount of Each Disbursement this Period 284.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 EXP RPT 11/04/07 SEE BELO- W:
C.	Full Name (Last, First, Middle Initial) Rita Versendaal Mailing Address 1948 Wisteria Rd City Rockford State IL Zip Code 61107-1583 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12846 Date of Disbursement 01 / 04 / 2008 Amount of Each Disbursement this Period 53.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

354.95

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) United States Treasury			Transaction ID: 80223.E12947		
	Mailing Address Electronic Federal Tax Payment Sys			Date of Disbursement 11 / 05 / 2007		
	City Washington		State DC	Amount of Each Disbursement this Period 1818.59		
	Purpose of Disbursement 941 Report		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		941 REPORT		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:				
B.	Full Name (Last, First, Middle Initial) Frank Sexton			Transaction ID: 80103.E12844		
	Mailing Address 20404 St. Barth Court			Date of Disbursement 01 / 04 / 2008		
	City Marengo		State IL	Zip Code 60152-	Amount of Each Disbursement this Period 183.32	
	Purpose of Disbursement Wages		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		WAGES		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:				
C.	Full Name (Last, First, Middle Initial) Illinois Department of Employment Sec			Transaction ID: 71104.E12714		
	Mailing Address PO Box 803414			Date of Disbursement 10 / 23 / 2007		
	City Chicago		State IL	Zip Code 60680-3414	Amount of Each Disbursement this Period 93.67	
	Purpose of Disbursement Illinois Unemployment Taxes		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		ILLINOIS UNEMPLOYMENT TAXES		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:				

SUBTOTAL of Disbursements This Page (optional) ▶

2095.58

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Rita Versendaal Mailing Address 1948 Wisteria Rd City Rockford State IL Zip Code 61107-1583 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71219.E12834 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 247.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WAGES
B.	Full Name (Last, First, Middle Initial) Insight Communications Mailing Address PO Box 740273 City Cincinnati State OH Zip Code 45274-0273 Purpose of Disbursement Internet Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12821 Date of Disbursement 12 / 17 / 2007 Amount of Each Disbursement this Period 153.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 INTERNET EXPENSE
C.	Full Name (Last, First, Middle Initial) Larry Kobischka Mailing Address 10469 Ray Drive City Roscoe State IL Zip Code 61073- Purpose of Disbursement Rent (January 2008) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71217.E12823 Date of Disbursement 12 / 17 / 2007 Amount of Each Disbursement this Period 1375.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT (JANUARY 2008)

SUBTOTAL of Disbursements This Page (optional)	1775.86
TOTAL This Period (last page this line number only)	81783.02

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) CAOG Mailing Address 5906 South Route 31 City Crystal Lake State IL Zip Code 60014- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12643 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) CAOG Mailing Address 5906 South Route 31 City Crystal Lake State IL Zip Code 60014- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71004.E12595 Date of Disbursement 10 / 01 / 2007 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Christiansen for Chairman Mailing Address Winnebago County Chairman PO Box 4033 City Rockford State IL Zip Code 61110-0533 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12787 Date of Disbursement 12 / 08 / 2007 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

350.00

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)

PAGE 133 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Citizens For Philip J. Nicolosi Mailing Address 7431 East State Street #349 City Rockford State IL Zip Code 61108- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12678 Date of Disbursement 10 / 23 / 2007 Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Citizens For Pritchard Mailing Address PO Box 303 City Sycamore State IL Zip Code 60178- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71114.E12726 Date of Disbursement 11 / 14 / 2007 Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Committee To Elect Michael W. Tryon Mailing Address 320 Douglas IL State Rep. - Dist 64 City Crystal Lake State IL Zip Code 60014- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71023.E12647 Date of Disbursement 10 / 20 / 2007 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	850.00
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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Charities Cosmopolitan

Mailing Address 5102 Citadel Ct

City State Zip Code
Rockford IL 61109-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71117.E12731
Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

140.00

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

B.

Full Name (Last, First, Middle Initial)
Republican Cent Cmte DeKalb County

Mailing Address PO Box 1056

City State Zip Code
DeKalb IL 60115-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80112.E12877
Date of Disbursement

01 / 12 / 2008

Amount of Each Disbursement this Period

350.00

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

C.

Full Name (Last, First, Middle Initial)
Congressman Don Manzullo

Mailing Address 792 E. Lightsville Road

City State Zip Code
Leaf River IL 61047-9449

Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71004.E12603
Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

474.79

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

SUBTOTAL of Disbursements This Page (optional) ►

964.79

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 135 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Evergreen Ball	Transaction ID: 71201.E12744 Date of Disbursement MM / DD / YYYY 11 / 26 / 2007
	Mailing Address Attn: Jane Smith 208 Robert Ave	Amount of Each Disbursement this Period 400.00
	City Rockford State IL Zip Code 61107-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input 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: District:	

B.	Full Name (Last, First, Middle Initial) Julfest, Inc	Transaction ID: 71018.E12614 Date of Disbursement MM / DD / YYYY 10 / 06 / 2007
	Mailing Address c/o Tammie Franklin 2011 Shaw Woods Drive	Amount of Each Disbursement this Period 350.00
	City Rockford State IL Zip Code 61107-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input 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: District:	

C.	Full Name (Last, First, Middle Initial) Services Lifescape Community	Transaction ID: 71018.E12625 Date of Disbursement MM / DD / YYYY 10 / 06 / 2007
	Mailing Address 705 Kilburn Ave.	Amount of Each Disbursement this Period 200.00
	City Rockford State IL Zip Code 61101-6537	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional)	950.00
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)

PAGE 136 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A. Full Name (Last, First, Middle Initial)
McHenry County Republican Central Cmte

Mailing Address PO Box 723

City Mchenry State IL Zip Code 60051-0723

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80112.E12875

Date of Disbursement

01 / 12 / 2008

Amount of Each Disbursement this Period

225.00

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

B. Full Name (Last, First, Middle Initial)
People with Hart (Melissa Hart - PA04)

Mailing Address PO Box 320412

City Alexandria State VA Zip Code 22320-

Purpose of Disbursement
PA-4 US CONGRESS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71208.E12790

Date of Disbursement

12 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

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

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

Mailing Address 108 Minnie Street

City Crystal Lake State IL Zip Code 60014-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 71004.E12604

Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

300.00

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

SUBTOTAL of Disbursements This Page (optional) ►

1525.00

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)

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.	Full Name (Last, First, Middle Initial) Tebala Shrine Mailing Address 7910 Newburg Road City Rockford State IL Zip Code 61108- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80103.E12837 Date of Disbursement 12 / 21 / 2007 Amount of Each Disbursement this Period 80.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) The J. Dennis Hastert Center Mailing Address PO Box 446 City Batavia State IL Zip Code 60510- 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71208.E12771 Date of Disbursement 12 / 04 / 2007 Amount of Each Disbursement this Period 700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Winnebago County GOP Central Committee Mailing Address 111 S. Madison Ave. City Rockford State IL Zip Code 61104-1111 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80112.E12876 Date of Disbursement 01 / 12 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1280.00
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)

PAGE 138 / 138

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

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

NAME OF COMMITTEE (In Full)
Donald A. Manzullo for Congress

A.

Full Name (Last, First, Middle Initial)
Winnebago County GOP Central Committee

Mailing Address 111 S. Madison Ave.

City State Zip Code
Rockford IL 61104-1111

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80103.E12851

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	1		0	3		2	0	0	8

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

6419.79