

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

COULSON FOR CONGRESS

ADDRESS (number and street) PO BOX 2354

Check if different than previously reported. (ACC)

GLENVIEW IL 60025

2. **FEC IDENTIFICATION NUMBER** C00465799

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

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

IL 10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on [] [] [] in the State of []

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

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

Election on [] [] [] in the State of []

5. Covering Period 10 01 2009 through 12 31 2009

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 KAREN JACOBSEN

Signature of Treasurer Electronically Filed by KAREN JACOBSEN Date 01 31 2010

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

Office Use Only							
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FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COULSON FOR CONGRESS

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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)).....	222308.82	350386.82
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	222308.82	350386.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	229279.41	267082.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	229279.41	267082.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	172909.13	
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).....	90000.00	

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
COULSON FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	161863.50	258863.50
(i) Itemized (use Schedule A).....	20295.32	33125.32
(ii) Unitemized.....	182158.82	291988.82
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	40150.00	58398.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	222308.82	350386.82
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	40000.00	90000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	40000.00	90000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	262308.82	440386.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	229279.41	267082.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	200.00	395.00
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	229479.41	267477.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	140079.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	262308.82
25. SUBTOTAL (add Line 23 and Line 24).....	402388.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	229479.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	172909.13

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

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

FOR LINE NUMBER: PAGE 5 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL ABROE

Mailing Address 212 WOODBINE AVE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
ABROE & MILLIMAN ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.5821

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DAVID J AHO

Mailing Address 405 FARRINGTON DRIVE

City State Zip Code
LINCOLNSHIRE IL 60069

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

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.5156

Amount of Each Receipt this Period
1000.00

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

Mailing Address 844 E ROCKLAND RD

City State Zip Code
LIBERTYVILLE IL 60048

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

Name of Employer Occupation
ALDRIDGE ELECTRIC OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.5826

Amount of Each Receipt this Period
2000.00

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: (check only one)	PAGE 6 / 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JAMES L ALEXANDER		Date of Receipt
	Mailing Address 130 S CANAL ST		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	CHICAGO	IL	60606
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6036
Name of Employer SELF		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>

B.	Full Name (Last, First, Middle Initial) NICHOLAS W ALEXOS		Date of Receipt
	Mailing Address 525 BROADSMORE DRIVE		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5162
Name of Employer MADISON DEARBORN PARTNERS LLC		Occupation MANAGING DIRECTOR	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) ROBERT E ALLGYER		Date of Receipt
	Mailing Address 282 W LAUREL AVE		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5253
Name of Employer SELF		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
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 7 / 146

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700		<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 9
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5486
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00

B.	Full Name (Last, First, Middle Initial) JEFFERY APFELBAUM		Date of Receipt
	Mailing Address 2560 GREENVIEW RD		<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 9
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5467
Name of Employer UNIV OF CHICAGO		Occupation PHYSICIAN	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) DAVID M ARONIN		Date of Receipt
	Mailing Address 2201 MAIN ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 9 / 2 0 0 9
	City	State	Zip Code
	EVANSTON	IL	60202
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5867
Name of Employer CARE CENTERS INC		Occupation CFO	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)

3250.00

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 / 146
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) TERRY ATHAS	Date of Receipt
	Mailing Address 1110 GLENVIEW RD	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 0 5 / 2 0 0 9
	City State Zip Code GLENVIEW IL 60025	Transaction ID: SA11AI.4919
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 500.00
	Name of Employer Occupation MESIROW SALES	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 500.00	

B.	Full Name (Last, First, Middle Initial) MARY LEE ATTEA	Date of Receipt
	Mailing Address 1140 PAM ANNE DR	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 0 / 2 0 0 9
	City State Zip Code GLENVIEW IL 60025	Transaction ID: SA11AI.6138
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 100.00
	Name of Employer Occupation N/A RETIRED	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) ALICE BARKHAUSEN	Date of Receipt
	Mailing Address 851 PEMBRIDGE DR	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 0 / 2 0 0 9
	City State Zip Code LAKE FOREST IL 60045	Transaction ID: SA11AI.6141
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENRY BARKHAUSEN

Mailing Address 851 PEMBRIDGE DR

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.6019

Amount of Each Receipt this Period
250.00

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

Mailing Address 9126 KEYSTONE

City State Zip Code
SKOKIE IL 60076

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

Name of Employer Occupation
BELLOWS NURSING HOMES OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5855

Amount of Each Receipt this Period
2000.00

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

Mailing Address 600 N MAYFLOWER RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
NORTH SHORE MEDICAL SVCS PHYSICIAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.5928

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER B BENSINGER

Mailing Address 500 MAYFLOWER

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
BENSINGER DUPONT & ASSOCIATES PRESIDENT EAP PROGRAMS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.5024

Amount of Each Receipt this Period
1400.00

B. Full Name (Last, First, Middle Initial)
ROBERT D BENTLEY, Jr.

Mailing Address 314 BIRCH CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
HEWITT ASSOCIATES CONSULTANT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5322

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LOUIS HARRISON BERNBAUM

Mailing Address 330 S GREEN BAY RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
HIGH SIERRA SPORT CO PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.5221

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHILIP D BLOCK, III

Mailing Address 1430 N LAKE SHORE DR

City State Zip Code
CHICAGO IL 60610

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.6334

Amount of Each Receipt this Period
500.00

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

Mailing Address 815 BARBERRY RD

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
YOUTH SVCS GLENVIEW NORTH-BROOK DIRECTOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.4927

Amount of Each Receipt this Period
250.00

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

Mailing Address 815 BARBERRY RD

City State Zip Code
HIGHLAND PARK IL 60035

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

Name of Employer Occupation
YOUTH SVCS GLENVIEW NORTH-BROOK DIRECTOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.4928

Amount of Each Receipt this Period
250.00

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 12 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ELIZABETH BODNER

Mailing Address 5707 N RAVENSWOOD

City State Zip Code
CHICAGO IL 60660

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

Name of Employer Occupation
UNIV OF CHICAGO EXEC DIRECTOR OBSTETRICS GYNECOLOGY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.4933

Amount of Each Receipt this Period
500.00

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

Mailing Address 10721 RED BARN LN

City State Zip Code
POTOMAC MD 20854

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.5832

Amount of Each Receipt this Period
2000.00

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

Mailing Address 10721 RED BARN LN

City State Zip Code
POTOMAC MD 20854

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

Name of Employer Occupation
THE BRICKMAN GROUP CEO LANDSCAPE MAINTENANCE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.5828

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 146
(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID BURGESS

Mailing Address 60 S ASBURY CT

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5516

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
CRAIG S BURKHARDT

Mailing Address 4000 CATHEDRAL AVE NW STE 217B

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
BARNES & THORNBURG LLP ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.5871

Amount of Each Receipt this Period
1500.00

Amount of Each Receipt this Period
1750.00

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

Mailing Address 710 SPRUCE ST

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6274

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

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)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
PATRICK CARROLL

Mailing Address 2785 24TH RD S

City State Zip Code
ARLINGTON VA 22206

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

Name of Employer Occupation
BIOTECHNOLOGY INDUSTRY ORG DIR FED GOVT RELATIONS

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5512

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
ANTHONY CHAPEKIS

Mailing Address 4116 APPLEWOOD LN

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.6028

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT SUSAN LOVING GRAVENHORST

Mailing Address 450 OAK RIDGE CT

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.6150

Amount of Each Receipt this Period

250.00

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 15 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEROME CONNOLLY

Mailing Address 632 SNOW GOOSE LANE

City State Zip Code
ANNAPOLIS MD 21409

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

Name of Employer AMERICAN ASSN FAMILY PHYSICIAN
Occupation LOBBYIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	9	

Transaction ID: SA11AI.5539

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

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

Mailing Address 632 SNOW GOOSE LANE

City State Zip Code
ANNAPOLIS MD 21409

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

Name of Employer AMERICAN ASSN FAMILY PHYSICIAN
Occupation LOBBYIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	9	

Transaction ID: SA11AI.6378

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 1000.00

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

Mailing Address 1031 PACIFIC AVE

City State Zip Code
WAUKEGAN IL 60085

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

Name of Employer RETIRED
Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	9	

Transaction ID: SA11AI.5249

Amount of Each Receipt this Period
300.00

Election Cycle-to-Date ▼ 1300.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT W CRAWFORD

Mailing Address 676 LAKE RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
BROOK FURNITURE RENTAL CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.5154

Amount of Each Receipt this Period
500.00

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

Mailing Address 915 OTTAWA LANE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
COREY STEEL COMPANY CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.5851

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
KENT P DAUTEN

Mailing Address 16 COUNTRY LANE

City State Zip Code
NORTHFIELD IL 60093

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

Name of Employer Occupation
KEYSTONE CAPITAL INC INVESTMENT MGR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.4959

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 / 146
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) DARCY DAVIDSMEYER	Date of Receipt MM / DD / YYYY 10 / 28 / 2009
	Mailing Address 21250 KEPWICK LANE	Transaction ID: SA11AI.4938
	City KILDEER State IL Zip Code 60047	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MOTOROLA Occupation MANAGEMENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) DEERE & COMPANY PAC (AKA JOHN DEERE PAC)	Date of Receipt MM / DD / YYYY 11 / 27 / 2009
	Mailing Address One John Deere Place DEERE & COMPANY, JOHN DEERE ROAD	Transaction ID: SA11AI.5450
	City Moline State IL Zip Code 61265	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) JAMES M DENNY	Date of Receipt MM / DD / YYYY 11 / 09 / 2009
	Mailing Address 1 N WACKER DRIVE	Transaction ID: SA11AI.5206
	City CHICAGO State IL Zip Code 60606	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer RETIRED Occupation RETIRED	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	6250.00
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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN DEPREE

Mailing Address 1075 WALDEN LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer N/A Occupation **HOMEMAKER**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5182

Amount of Each Receipt this Period
500.00

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

Mailing Address 776 N GREEN BAY RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer ATHALIE DERSE INC Occupation **INTERIOR DESIGNER**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.6179

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
WILLIAM J DEVERS

Mailing Address 1200 CENTRAL STE 306

City State Zip Code
WILMETTE IL 60091

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

Name of Employer DEVERS GROUP INC Occupation **PRESIDENT**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.4978

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
DAVID W DEVONSHIRE

Mailing Address 1022 AYNSLEY AVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.5219

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
SATISH K DHANDA

Mailing Address 1675 S ARLINGTON HEIGHTS RD

City State Zip Code
ARLINGTON HEIGHTS IL 60005

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.4972

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)
Dr. GLORIA A DIGENNARO-CABRERA

Mailing Address 1708 SEQUOIA TRAIL

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
SELF DENTIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5199

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J PATRICK DOHERTY

Mailing Address 1 THE LANDMARK

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6003

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
DAVID E DONOVAN

Mailing Address 211 W WESTMINSTER

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer J P MORGAN Occupation EXEC VICE PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.5224

Amount of Each Receipt this Period
1000.00

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

Mailing Address 15 OLD HUNT RD

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.5847

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **3600.00**

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN DOWDLE

Mailing Address 15 OLD HUNT RD

City State Zip Code
NORTHFIELD IL 60093

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

Name of Employer Occupation
POTASH CORP SR VP

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.5845

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
RICHARD L DUCHOSSOIS

Mailing Address 845 LARCH AVE

City State Zip Code
ELMHURST IL 60126

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

Name of Employer Occupation
THE DUCHOSSOIS GROUP CHAIRMAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5398

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
THOMAS J DUCKWORTH

Mailing Address 77 STONE GATE LANE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.5488

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AUGIE FABELA

Mailing Address 28100 BONITA GRANDE DRIVE

City State Zip Code
BONITA SPRINGS FL 34135

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5837

Amount of Each Receipt this Period
2400.00

2400.00

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

Mailing Address 5226 BUENA VIA BUENA VISTA

City State Zip Code
PARADISE VALLEY AZ 85253

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

Name of Employer Occupation
FEARON PHYSICAL THERAPY PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5543

Amount of Each Receipt this Period
500.00

500.00

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

Mailing Address 71 S WACKER DR #500

City State Zip Code
CHICAGO IL 60606

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.6276

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARBARA FILIPPINI

Mailing Address 1148 OAKLEY

City State Zip Code
WINNETKA IL 60093

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

Name of Employer N/A Occupation **HOMEMAKER**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.6332

Amount of Each Receipt this Period
250.00

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

Mailing Address 1148 OAKLEY

City State Zip Code
WINNETKA IL 60093

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

Name of Employer WILLIS OF ILLINOIS INC Occupation **INSURANCE**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5396

Amount of Each Receipt this Period
250.00

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

Mailing Address 827 ELMWOOD AVE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer N SHORE UNIV HEALTH SYSTEM Occupation **PHYSICIAN**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5531

Amount of Each Receipt this Period
250.00

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL C FLAGG

Mailing Address 821 ARBOR LANE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
THE MEETING GROUP CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.5930

Amount of Each Receipt this Period
500.00

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

Mailing Address 34824 OAK KNOLL CIRCLE

City State Zip Code
GURNEE IL 60031

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

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2010 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 0 / 2 0 0 9

Transaction ID: SA11AI.5213

Amount of Each Receipt this Period
500.00

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

Mailing Address 1687 WINNETKA RD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
UNIV CHGO MEDICAL CTR PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5392

Amount of Each Receipt this Period
100.00

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONNA FROWNFELTER

Mailing Address 3349 RALMARK LANE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
ROSALIND FRANKLIN ASST PROFESSOR PHYSICAL THERAPY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

Transaction ID: SA11AI.5464

Amount of Each Receipt this Period
130.00

230.00

B. Full Name (Last, First, Middle Initial)
JENNIFER J GEDVILLE

Mailing Address 209 ALEXANDRIA DRIVE

City State Zip Code
VERNON HILLS IL 60061

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

Name of Employer Occupation
LAVIN & WALDON PC ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.5188

Amount of Each Receipt this Period
500.00

500.00

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

Mailing Address 975 LAKE RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
BRENTWOOD ASSOCIATES PRIVATE EQUITY PARTNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.5168

Amount of Each Receipt this Period
1000.00

1000.00

SUBTOTAL of Receipts This Page (optional) ► **1630.00**

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARTHUR S GOLD

Mailing Address 1200 N SHERIDAN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
ARTHUR S GOLD LLC ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.6494

Amount of Each Receipt this Period
1071.75

In-kind - Catering Fundraiser

3471.75

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

Mailing Address 2560 RIVERWOODS RD

City State Zip Code
RIVERWOODS IL 60015

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

Name of Employer Occupation
DDG INC REAL ESTATE INVESTOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5299

Amount of Each Receipt this Period
1000.00

1000.00

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

Mailing Address 2560 RIVERWOODS RD

City State Zip Code
RIVERWOODS IL 60015

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

Name of Employer Occupation
DDG INC REAL ESTATE INVESTOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6004

Amount of Each Receipt this Period
100.00

1100.00

SUBTOTAL of Receipts This Page (optional) ► **2171.75**

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

A. Form/Schedule : **SA11AI**

Skokie Country Club Event

Transaction ID : **SA11AI.6494**

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

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

FOR LINE NUMBER: PAGE 28 / 146

(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
WILLIAM GRAHAM

Mailing Address 515 GREENWAY AVE

City State Zip Code
GREEN LAKE WI 54941

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.5136

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
JEFFREY R GRAY

Mailing Address 441 S STUART LANE

City State Zip Code
PALATINE IL 60067

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

Name of Employer Occupation
BARNES & THORNBURG LLP ATTORNEY

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5431

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
WILLIAM J HAGENAH

Mailing Address 315 WARWICK RD

City State Zip Code
KENILWORTH IL 60043

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5191

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER HAMILTON

Mailing Address 970 E DEERPATH

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
BRUNSWICK CORPORATION SR VP - CFO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6132

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARGARET S HART

Mailing Address 1272 N GREEN BAY RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5195

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARGARET S HART

Mailing Address 1272 N GREEN BAY RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.6158

Amount of Each Receipt this Period
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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GREGG HARTEMAYER

Mailing Address 1372 TRAPP LN

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5328

Amount of Each Receipt this Period
500.00

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

Mailing Address 3451 W GLENLAKE AVE

City State Zip Code
CHICAGO IL 60659

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

Name of Employer Occupation
NUCARE CORP OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5861

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
WAYNE E HEDIEN

Mailing Address 2511 CRABTREE LANE

City State Zip Code
NORTHBROOK IL 60025

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 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 9

Transaction ID: SA11AI.4981

Amount of Each Receipt this Period
500.00

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 31 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JON M HENRICKS

Mailing Address 1480 S WOLF RD

City State Zip Code
WHEELING IL 60090

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

Name of Employer DOALL CO Occupation OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5316

Amount of Each Receipt this Period
500.00

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

Mailing Address 1712 CENTRAL AVE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer JACKSON HIRSH INC Occupation PRINCIPAL

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.5841

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LOUISE A HOLLAND

Mailing Address 545 OAK ST

City State Zip Code
WINNETKA IL 60093

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

Name of Employer ABBELL CREDIT CORP Occupation CONSULTANT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5567

Amount of Each Receipt this Period
1500.00

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: (check only one)	PAGE 32 / 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JACK HOTALING	Date of Receipt MM / DD / YYYY 11 / 19 / 2009
	Mailing Address 4515 N SEMINOLE DR	Transaction ID: SA11AI.5349
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RIDGEBROOK TRAVEL TRAVEL AGENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) JACK HOTALING	Date of Receipt MM / DD / YYYY 12 / 21 / 2009
	Mailing Address 4515 N SEMINOLE DR	Transaction ID: SA11AI.6093
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RIDGEBROOK TRAVEL TRAVEL AGENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) VIRGINIA A HOTALING	Date of Receipt MM / DD / YYYY 12 / 21 / 2009
	Mailing Address 4515 SEMINOLE DR	Transaction ID: SA11AI.6092
	City State Zip Code GLENVIEW IL 60025	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CHICAGO BOTANIC GARDENS DIRECTOR GOVT AFFAIRS	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 610.00	

SUBTOTAL of Receipts This Page (optional)	▶	260.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANNE HUNTING

Mailing Address 1421 LAKE RD

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer SELF Occupation DOMESTIC ENGINEER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2009
Transaction ID: SA11AI.4942
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
ANTHONY D IVANKOVICH

Mailing Address 150 MICHIGAN AVE

City WILMETTE State IL Zip Code 60091

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

Name of Employer UNIVERSITY ANESTHESIOLOGS-TS SC Occupation CHAIRMAN - PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 12 / 21 / 2009
Transaction ID: SA11AI.6079
 Amount of Each Receipt this Period: 250.00

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

Mailing Address P O BOX 650

City LA GRANGE State IL Zip Code 60525

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

Name of Employer EASTER SEALS INC Occupation EXECUTIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt: 12 / 03 / 2009
Transaction ID: SA11AI.5820
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES R JENNINGS

Mailing Address 1220 OAKWOOD LN

City State Zip Code
GLENVIEW IL 50025

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

Name of Employer Occupation
JENNINGS CHEVROLET PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6083

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
JAMES R JENNINGS

Mailing Address 1220 OAKWOOD LN

City State Zip Code
GLENVIEW IL 50025

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

Name of Employer Occupation
JENNINGS CHEVROLET PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.6175

Amount of Each Receipt this Period
200.00

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

Mailing Address 2160 ROYAL RIDGE DR

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.6152

Amount of Each Receipt this Period
250.00

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 35 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROXANNE JUNGE

Mailing Address 1040 GLADISH LN

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
GLENVIEW NEW CHURCH SCHOOL TEACHER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

Transaction ID: SA11AI.5271

Amount of Each Receipt this Period
100.00

350.00

B. Full Name (Last, First, Middle Initial)
PATRICIA M KAMMERER

Mailing Address 1361 ESTATE LANE E

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
BAIRD & WARNER REAL ESTATE AGENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	9

Transaction ID: SA11AI.5243

Amount of Each Receipt this Period
250.00

250.00

C. Full Name (Last, First, Middle Initial)
HOWARD G KAPLAN

Mailing Address 180 N LASALLE STE 2805

City State Zip Code
CHICAGO IL 60601

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

Name of Employer Occupation
THE KAPLAN GROUP LTD ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	9

Transaction ID: SA11AI.5996

Amount of Each Receipt this Period
250.00

350.00

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 / 146
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) DENNIS KELLER			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2009		
	Mailing Address 1155 55TH ST			Transaction ID: SA11AI.5411		
	City OAK BROOK	State IL	Zip Code 60523	Amount of Each Receipt this Period 500.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer DEVRY INC		Occupation DIRECTOR EMERITUS			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00				

B.	Full Name (Last, First, Middle Initial) KAREN KELLY			Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2009		
	Mailing Address 840 APPLETREE LN			Transaction ID: SA11AI.5933		
	City GLENVIEW	State IL	Zip Code 60025	Amount of Each Receipt this Period 500.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00				

C.	Full Name (Last, First, Middle Initial) MICHAEL E KERR			Date of Receipt M M / D D / Y Y Y Y 12 / 21 / 2009		
	Mailing Address 9516 RIDGEWAY AVE			Transaction ID: SA11AI.6102		
	City EVANSTON	State IL	Zip Code 60203	Amount of Each Receipt this Period 250.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer CHRISTOPHER BURKE ENGINEERING		Occupation ENGINEER			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00				

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEFFREY KIMBELL

Mailing Address 601 13TH ST NW 11TH FLR S

City WASHINGTON State DC Zip Code 20005

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

Name of Employer: JEFFERY J KIMBELL & ASSOCIATES
Occupation: PRESIDENT

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 13 / 2009
Transaction ID: SA11AI.5514
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JOHN H KREHBIEL, Jr.

Mailing Address 930 ROSEMARY RD

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer: MOLEX INC
Occupation: CO-CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 23 / 2009
Transaction ID: SA11AI.5402
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address 3835 KINGSWOOD RD

City SHERMAN OAKS State CA Zip Code 91403

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

Name of Employer: NORTHROP GRUMMAN
Occupation: ENGINEER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 16 / 2009
Transaction ID: SA11AI.4975
 Amount of Each Receipt this Period: 500.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SARAH K LAMPHERE

Mailing Address 907 N SHERIDAN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer VAN VLISSINGEN & CO Occupation REAL ESTATE DEVELOPER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.5158

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
KATHRYN HART LANSING

Mailing Address 390 E WISCONSIN

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5186

Amount of Each Receipt this Period
250.00

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

Mailing Address 390 E WISCONSIN AVE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer LITCHFIELD ADVISORS Occupation REAL ESTATE ADVISOR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.6279

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM M LEE, Jr.
Mailing Address 4 THREE LAKES RD
City BARRINGTON State IL Zip Code 60010
FEC ID number of contributing federal political committee. **C**
Name of Employer BARNES & THORNBURG LLP Occupation ATTORNEY
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt: 11 / 24 / 2009
Transaction ID: SA11AI.5439
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
JOHN M LEOVY
Mailing Address 4614 N LEAVITT ST
City CHICAGO State IL Zip Code 60625
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF CHICAGO Occupation ATTORNEY
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00
Date of Receipt: 12 / 21 / 2009
Transaction ID: SA11AI.6107
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
WAYNE LERNER
Mailing Address 1025 GLENVIEW RD
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer HOLY CROSS HOSPITAL Occupation PRESIDENT-CEO
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00
Date of Receipt: 12 / 04 / 2009
Transaction ID: SA11AI.6001
Amount of Each Receipt this Period: 250.00

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 40 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. DAVID B LEWIS

Mailing Address 620 CHATHAM RD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer COLONIAL DENTAL GROUP Occupation OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5387

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN S LILLIARD

Mailing Address 1340 N WAUKEGAN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 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 9

Transaction ID: SA11AI.5020

Amount of Each Receipt this Period
1000.00

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

Mailing Address 331 N MAYFLOWER RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.6165

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 146

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
NED LUFRANO

Mailing Address 3150 N LAKE SHORE DR 6A

City State Zip Code
CHICAGO IL 60657

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5324

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
EILEEN LYONS

Mailing Address 4035 CENTRAL AVE

City State Zip Code
WESTERN SPRINGS IL 60558

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

Name of Employer Occupation
STATE OF ILLINOIS REPRESENTATIVE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.6366

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
DAVID MACKENZIE

Mailing Address 700 E WOODLAND RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6071

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 42 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARRY MACLEAN
Mailing Address 15330 OLD SCHOOL RD
City METTAWA State IL Zip Code 60048
FEC ID number of contributing federal political committee. **C**
Name of Employer MACLEAN-FOGG Occupation PRESIDENT & CEO
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2400.00
Date of Receipt 12 / 11 / 2009
Transaction ID: SA11AI.6346
Amount of Each Receipt this Period 2400.00

B. Full Name (Last, First, Middle Initial)
MARY ANN MACLEAN
Mailing Address 15330 OLD SCHOOL RD
City METTAWA State IL Zip Code 60048
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation HOMEMAKER
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2400.00
Date of Receipt 12 / 11 / 2009
Transaction ID: SA11AI.6348
Amount of Each Receipt this Period 2400.00

C. Full Name (Last, First, Middle Initial)
KIM MADDEN
Mailing Address 1165 ASH LAWN DR
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer KNAUZ MARKETING Occupation CORPORATE SECRETARY
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.4949
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 5800.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES M MAGISTRO

Mailing Address **3816 HOLLING AVE**

City **CLAIREMONT** State **CA** Zip Code **91711**

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

Name of Employer **RETIRED** Occupation **RETIRED/PHYSICAL THERAPIST**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **12 / 29 / 2009**
Transaction ID: SA11AI.6130
 Amount of Each Receipt this Period **250.00**

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

Mailing Address **925 LAKE AVE**

City **WILMETTE** State **IL** Zip Code **60091**

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

Name of Employer **NOVACK & MACY LLP** Occupation **ATTORNEY**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**
Transaction ID: SA11AI.5529
 Amount of Each Receipt this Period **500.00**

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

Mailing Address **51200 WHEATON CT**

City **GRANGER** State **IN** Zip Code **46530**

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

Name of Employer **LIFE IN BALANCE** Occupation **PHYSICAL THERAPIST**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **12 / 08 / 2009**
Transaction ID: SA11AI.5922
 Amount of Each Receipt this Period **1000.00**

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)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
DAVID MASON

Mailing Address 170 DICKENS RD

City State Zip Code
NORTHFIELD IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 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 9 / 2 0 0 9

Transaction ID: SA11AI.4917

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
PETER J MCMENAMIN

Mailing Address 25 E WASHINGTON STE 1310

City State Zip Code
CHICAGO IL 60610

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

Name of Employer Occupation
PHYSICAL THERAPY CHICAGO PRESIDENT - PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.6308

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MADONNA S MERRITT

Mailing Address 515 CAMBRIDGE LANE

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Occupation
NONE NONE

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.5138

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM B METZDORFF

Mailing Address 3167 N CAMBRIDGE

City State Zip Code
CHICAGO IL 60657

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

Name of Employer Occupation
BLACKMAN KALICK CONSULTANT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.5818

Amount of Each Receipt this Period
250.00

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

Mailing Address 120 WOODLEY RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.5575

Amount of Each Receipt this Period
250.00

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

Mailing Address 200 W ADAMS ST STE 2500

City State Zip Code
CHICAGO IL 60606

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

Name of Employer Occupation
NISEN & ELLIOTT ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.5936

Amount of Each Receipt this Period
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)
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FOR LINE NUMBER: PAGE 46 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN MIRETZKY

Mailing Address 3112 W SHERWIN

City State Zip Code
CHICAGO IL 60645

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

Name of Employer CARE CENTERS INC Occupation TREASURER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.5863

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2418 SHORELINE HEIGHTS

City State Zip Code
STERLING IL 61081

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

Name of Employer STATE OF ILLINOIS Occupation STATE REPRESENTATIVE

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.5142

Amount of Each Receipt this Period
500.00

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

Mailing Address 727 PLEASANT LN

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer THOMAS & THOMAS ASSOCIATES INC Occupation REAL ESTATE DEVELOPER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5839

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

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for each category of the
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES S MONTANA, Jr.
Mailing Address 1938 N MAUD ST
City CHICAGO State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer VEDDER PRICE PC Occupation ATTORNEY
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt 12 / 29 / 2009
Transaction ID: SA11AI.5935
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
ANDREA MOORE
Mailing Address 361 S ST MARYS RD
City LIBERTYVILLE State IL Zip Code 60048
FEC ID number of contributing federal political committee. **C**
Name of Employer STATE OF ILLINOIS Occupation IL POLLUTION CONTROL BOARD MEMBER
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 16 / 2009
Transaction ID: SA11AI.6038
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
SUSAN MORRISON
Mailing Address 600 E WESTMINSTER RD
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 30 / 2009
Transaction ID: SA11AI.5465
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 48 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) MARY P MURLEY		Date of Receipt MM / DD / YYYY 11 / 12 / 2009
Mailing Address 994 MEADOW LANE		Transaction ID: SA11AI.5240
City LAKE FOREST	State Zip Code IL 60045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer SELF	Occupation HOMEMAKER	Election Cycle-to-Date 2400.00
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) MARY P MURLEY		Date of Receipt MM / DD / YYYY 11 / 12 / 2009
Mailing Address 994 MEADOW LANE		Transaction ID: SA11AI.5241
City LAKE FOREST	State Zip Code IL 60045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF	Occupation HOMEMAKER	Election Cycle-to-Date 2500.00
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) KEVIN NELSON		Date of Receipt MM / DD / YYYY 11 / 10 / 2009
Mailing Address 1755 TALLGRASS LANE		Transaction ID: SA11AI.5228
City LAKE FOREST	State Zip Code IL 60045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer REYES HOLDINGS LLC	Occupation CHIEF ENGINEER	Election Cycle-to-Date 250.00
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	2750.00
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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES OHARA

Mailing Address 1621 BLACKTHORN DR

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
ANDEX CO MANAGER

Receipt For: 2010 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 9

Transaction ID: SA11AI.5491

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1640 BLACKTHORN DRIVE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
ANDERSON PEST SOLUTIONS MANAGEMENT

Receipt For: 2010 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 9

Transaction ID: SA11AI.5493

Amount of Each Receipt this Period
500.00

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

Mailing Address 1570 TOWER RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
PADGITT & PEPPEY LTD ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5563

Amount of Each Receipt this Period
500.00

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 50 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANN M PASQUESI

Mailing Address 098 RINGWOOD RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5011

Amount of Each Receipt this Period
500.00

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

Mailing Address 584 FLETCHER CIRCLE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
PEDERSEN & HOUPT ATTORNEY

Receipt For: 2010 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 9

Transaction ID: SA11AI.5132

Amount of Each Receipt this Period
1000.00

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

Mailing Address 830 HILL RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
CIVC PARTNERS INVESTOR

Receipt For: 2010 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 9

Transaction ID: SA11AI.5129

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIEL B PETERSON

Mailing Address 1939 W BURR OAK DR

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
Z S ASSOCIATES INC MARKETING CONSULTANT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5013

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1939 W BURR OAK DR

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
Z S ASSOCIATES INC MARKETING CONSULTANT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.5360

Amount of Each Receipt this Period
1400.00

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

Mailing Address 1939 BURR OAK DRIVE WEST

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.5361

Amount of Each Receipt this Period
1400.00

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

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 / 146
(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)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MELANIE PETERSON

Mailing Address 1939 BURR OAK DRIVE WEST

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.5872

Amount of Each Receipt this Period
800.00

2200.00

B. Full Name (Last, First, Middle Initial)
ROBERT F PHELPS

Mailing Address 1500 HINMAN AVE
APT 301

City State Zip Code
EVANSTON IL 60091

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.5995

Amount of Each Receipt this Period
150.00

250.00

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

Mailing Address 945 LINDEN

City State Zip Code
OAK PARK IL 60302

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

Name of Employer DUPAGE MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.4921

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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

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

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

FOR LINE NUMBER: PAGE 53 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD PONT

Mailing Address 945 LINDEN

City OAK PARK State IL Zip Code 60302

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

Name of Employer DUPAGE MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 530.00

Date of Receipt 11 / 30 / 2009
Transaction ID: SA11AI.5473
 Amount of Each Receipt this Period 30.00

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

Mailing Address 4 STONEGATE CT

City BUFFALO GROVE State IL Zip Code 60089

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 19 / 2009
Transaction ID: SA11AI.5353
 Amount of Each Receipt this Period 100.00

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

Mailing Address 6633 N LINCOLN AVE

City LINCOLNWOOD State IL Zip Code 60712

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

Name of Employer ITEX Occupation NURSING HOME MGR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 12 / 24 / 2009
Transaction ID: SA11AI.5859
 Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2130.00

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 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES REARDON
 Mailing Address 4405 HAMMERSMITH LN
 City State Zip Code
 GLENVIEW IL 60026
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9
Transaction ID: SA11AI.6167
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 READINESS GROUP LLC FIRE & SAFETY CONSULTANT
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Full Name (Last, First, Middle Initial)
BORO RELJIC
 Mailing Address 4408 CASTLE PINES
 City State Zip Code
 SPRINGFIELD IL 62711
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 9
Transaction ID: SA11AI.5577
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ABBOTT LABORATORIES LOBBYIST
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. Full Name (Last, First, Middle Initial)
ANNE REYES
 Mailing Address 9500 W BRYN MAWR AVE STE 700
 City State Zip Code
 ROSEMONT IL 60018
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 1 3 / 2 0 0 9
Transaction ID: SA11AI.5302
 Amount of Each Receipt this Period
 2400.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF HOMEMAKER
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

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 55 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID K REYES

Mailing Address 1625 S LEWIS ST

City ANAHEIM State CA Zip Code 92805

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

Name of Employer REYES HOLDINGS LLC Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 10 / 2009
Transaction ID: SA11AI.5226
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
J CHRISTOPHER REYES

Mailing Address 9500 W BRYN MAWR AVE STE 700

City ROSEMONT State IL Zip Code 60018

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

Name of Employer REYES HOLDING LLC Occupation CHAIRMAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: SA11AI.5301
 Amount of Each Receipt this Period: 2400.00

C. Full Name (Last, First, Middle Initial)
LORI W REYES

Mailing Address 210 MELROSE

City KENILWORTH State IL Zip Code 60045

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 11 / 12 / 2009
Transaction ID: SA11AI.5238
 Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► 5800.00

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 / 146
	(check only one)
<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) M JUDE REYES	Date of Receipt
	Mailing Address 210 MELROSE AVE	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 10 / 2009
	City State Zip Code KENILWORTH IL 60045	Transaction ID: SA11AI.5234
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 2400.00
	Name of Employer Occupation REYES HOLDINGS LLC CO-CHAIRMAN	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 2400.00	

B.	Full Name (Last, First, Middle Initial) NANCY RICHMAN	Date of Receipt
	Mailing Address 1268 SHERIDAN RD	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 30 / 2009
	City State Zip Code HIGHLAND PARK IL 60035	Transaction ID: SA11AI.6316
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 200.00
	Name of Employer Occupation GLANTZ RICHMAN REHAB OCCUPATIONAL THERAPIST	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 300.00	

C.	Full Name (Last, First, Middle Initial) JOEL R RIECHERS	Date of Receipt
	Mailing Address 1073 OAK ST	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 10 / 2009
	City State Zip Code WINNETKA IL 60093	Transaction ID: SA11AI.5230
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 250.00
	Name of Employer Occupation SELF ATTORNEY	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2850.00
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 57 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KENNETH RIPSTEIN

Mailing Address 3939 EMERSON ST

City State Zip Code
EVANSTON IL 60203

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

Name of Employer Occupation
BELLOWS NURSING HOME OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5857

Amount of Each Receipt this Period
2000.00

2000.00

B. Full Name (Last, First, Middle Initial)
BETSY BERGMAN ROSENFELD

Mailing Address 10 WEST DEERPATH

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.5236

Amount of Each Receipt this Period
500.00

500.00

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

Mailing Address 823 BALMORAL LANE

City State Zip Code
NORTHBROOK IL 60062

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

Name of Employer Occupation
SELF CAREER COUNSELOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.5208

Amount of Each Receipt this Period
500.00

500.00

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 58 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIC ROTHNER

Mailing Address 2201 MAIN ST

City State Zip Code
EVANSTON IL 60202

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

Name of Employer Occupation
HEALTHCARE FACILITY OWNER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.5869

Amount of Each Receipt this Period
1000.00

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

Mailing Address P O BOX 805398

City State Zip Code
CHICAGO IL 60680

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

Name of Employer Occupation
EXELON CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.5843

Amount of Each Receipt this Period
1000.00

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

Mailing Address 401 SHERIDAN RD

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
BARNES & THORNBURG LLP ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5429

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 59 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRANK JOHN SAIBERT

Mailing Address 70 W MADISON STE 3500

City State Zip Code
CHICAGO IL 60602

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

Name of Employer Occupation
UNGARETTI & HARRIS LLP ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5417

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1190 MOUNT VERNON

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
SELF HOMEMAKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5263

Amount of Each Receipt this Period
500.00

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

Mailing Address 2018 ERIE ST

City State Zip Code
GROVE CITY PA 16127

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

Name of Employer Occupation
TMS PHYSICAL THERAPY PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5926

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 60 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KENNETH D SCHMIDT

Mailing Address 1785 ROBINWOOD LN

City RIVERWOODS State IL Zip Code 60015

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.5159

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
KENNETH D SCHMIDT

Mailing Address 1785 ROBINWOOD LN

City RIVERWOODS State IL Zip Code 60015

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5378

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
KENNETH D SCHMIDT

Mailing Address 1785 ROBINWOOD LN

City RIVERWOODS State IL Zip Code 60015

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.6042

Amount of Each Receipt this Period
 100.00

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 61 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
EDWIN A SEIPP

Mailing Address 49 TUSCALOOSA AVE

City State Zip Code
ATHERTON CA 94027

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.5007

Amount of Each Receipt this Period
250.00

EARMARKED - WISH LIST, THE

B.

Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.5007.0

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
JIM SKOGSBERGH

Mailing Address 550 N ELM

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Occupation
ADVOCATE HEALTH CARE PRESIDENT & CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6136

Amount of Each Receipt this Period
500.00

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 62 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) JANE SNYDER</p> <p>Mailing Address 810 LAKEWOOD DR</p> <p>City State Zip Code LINCOLN NE 68510</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SNYDER PHYSICAL THERAPY PHYSICAL THERAPIST</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 3 / 2 0 0 9</p> <p>Transaction ID: SA11AI.5541</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>500.00</p>	

<p>B. Full Name (Last, First, Middle Initial) HERBERT SOHN</p> <p>Mailing Address 5244 FARWELL AVE</p> <p>City State Zip Code SKOKIE IL 60077</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 9</p> <p>Transaction ID: SA11AI.6035</p> <p>Amount of Each Receipt this Period 200.00</p>
<p>250.00</p>	

<p>C. Full Name (Last, First, Middle Initial) ROBERT SOUDAN</p> <p>Mailing Address 110 SHERIDAN RD</p> <p>City State Zip Code WINNETKA IL 60093</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation BRB DEVELOPMENT REAL ESTATE DEVELOPER</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 9</p> <p>Transaction ID: SA11AI.6492</p> <p>Amount of Each Receipt this Period 1071.75</p> <p>In-kind - Catering Fundraiser</p>
<p>3471.75</p>	

SUBTOTAL of Receipts This Page (optional)	1771.75
TOTAL This Period (last page this line number only)	

C. Form/Schedule : **SA11AI**

Skokie Country Club Event

Transaction ID : **SA11AI.6492**

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

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

FOR LINE NUMBER: PAGE 64 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARRISON STEANS
Mailing Address 1900 MEADOW LN
City BANNOCKBURN State IL Zip Code 60015
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INVESTOR
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.5825
Amount of Each Receipt this Period 1400.00

B. Full Name (Last, First, Middle Initial)
HARRISON STEANS
Mailing Address 1900 MEADOW LN
City BANNOCKBURN State IL Zip Code 60015
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INVESTOR
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.6496
Amount of Each Receipt this Period 600.00

C. Full Name (Last, First, Middle Initial)
JULIE STRACKS
Mailing Address 913 GREENWOOD AVE
City WINNETKA State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 24 / 2009
Transaction ID: SA11AI.6122
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 65 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT J STRACKS

Mailing Address 913 GREENWOOD AVE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.6336

Amount of Each Receipt this Period
250.00

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

Mailing Address 1416 SCHOOLHOUSE WAY

City State Zip Code
SAN MARCOS CA 92078

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

Name of Employer E-REHAB PHYSICAL THERAPY Occupation PRESIDENT-PHYSICAL THERAPIST

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.6110

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
HERBERT F STRIDE

Mailing Address 1190 EDGEWOOD RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5291

Amount of Each Receipt this Period
1400.00

SUBTOTAL of Receipts This Page (optional) ► 2150.00

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 66 / 146
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) HERBERT F STRIDE	Date of Receipt MM / DD / YYYY 11 / 13 / 2009
	Mailing Address 1190 EDGEWOOD RD	Transaction ID: SA11AI.5292
	City LAKE FOREST State IL Zip Code 60045	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF Occupation ATTORNEY	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) BARBARA STRUTHERS	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 1706 GARAND DRIVE	Transaction ID: SA11AI.6128
	City DEERFIELD State IL Zip Code 60015	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF Occupation ENVIRONMENTAL POLICY CONSULTANT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) ALEXANDER D STUART	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 506 N WASHINGTON	Transaction ID: SA11AI.5166
	City LAKE FOREST State IL Zip Code 60045	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NORTH STAR INVESTMENTS INC Occupation INVESTOR	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

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 67 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT STUART

Mailing Address 150 FIELD DRIVE STE 100

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5319

Amount of Each Receipt this Period
2400.00

2400.00

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

Mailing Address 1050 GLADISH LANE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.5257

Amount of Each Receipt this Period
250.00

250.00

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

Mailing Address 978 SUNSET RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
NORTHSHORE UNIV HEALTH PHYSICIAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.5453

Amount of Each Receipt this Period
250.00

250.00

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 68 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ZUBIN TANTRA
Mailing Address 2426 RFD
City LONG GROVE State IL Zip Code 60047
FEC ID number of contributing federal political committee. **C**
Name of Employer LAKE CTY PHYSICAL THERAPY Occupation PHYSICAL THERAPIST
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.6213
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
CORRINE P TAYLOR
Mailing Address 88 WARRINGTON DRIVE
City LAKE BLUFF State IL Zip Code 60044
FEC ID number of contributing federal political committee. **C**
Name of Employer UNITED AIRLINES Occupation FLIGHT ATTENDANT
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 11 / 10 / 2009
Transaction ID: SA11AI.5232
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
RICHARD THOMAS
Mailing Address 82 INDIAN HILL RD
City WINNETKA State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt 11 / 03 / 2009
Transaction ID: SA11AI.5140
Amount of Each Receipt this Period 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 69 / 146

(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
RICHARD THOMAS

Mailing Address 82 INDIAN HILL RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6088

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
JAMES R THOMPSON, Jr.

Mailing Address 33 E BELLEVUE PL UNIT 7W

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Occupation
WINSTON & STRAWN LLP PARTNER - SR CHAIRMAN

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6094

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
PATRICIA C TILGHMAN

Mailing Address 819 CHATHAM RD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
PARISH COUNSELING SVCS THERAPIST

Receipt For: 2010 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 2 / 2 0 0 9

Transaction ID: SA11AI.6330

Amount of Each Receipt this Period

500.00

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 70 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD H TILGHMAN

Mailing Address 819 CHATHAM RD

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
PARISH COUNSELING SERVICES THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.5255

Amount of Each Receipt this Period
500.00

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

Mailing Address 975 PINE TREE LANE

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
SHAW GUSSIS FISHMAN GLANTZ ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.5445

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS

Mailing Address 228 S. Washington Street
Suite 115

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.5459

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 71 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KENNETH J TUMAN

Mailing Address 1325 HACKBERRY LN

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
UNIVERSITY ANESTHESIOLOGI- PRESIDENT - MD
STS S

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6077

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JERRE VAN DEN BENT

Mailing Address 2135 ELMWOOD BLVD

City State Zip Code
DALLAS TX 75224

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

Name of Employer Occupation
THERAPY 2000 PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.6203

Amount of Each Receipt this Period
250.00

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

Mailing Address 3 FIRST NATIONAL PLAZA

City State Zip Code
CHICAGO IL 60602

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

Name of Employer Occupation
HOPKINS & SUTTER ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.5413

Amount of Each Receipt this Period
250.00

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 72 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY VOORHEES
Mailing Address 475 W DEERPATH
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer H/A Occupation HOMEMAKER
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 1000.00
Date of Receipt: 11 / 12 / 2009
Transaction ID: SA11AI.5245
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
FREDERICK WADDELL
Mailing Address 1111 ASHLAND AVE
City WILMETTE State IL Zip Code 60091
FEC ID number of contributing federal political committee. **C**
Name of Employer NORTHERN TRUST Occupation BANKER
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 2400.00
Date of Receipt: 12 / 30 / 2009
Transaction ID: SA11AI.5938
Amount of Each Receipt this Period: 2400.00

C. Full Name (Last, First, Middle Initial)
RONALD WAIT
Mailing Address 110 E 2ND ST
City BELVIDERE State IL Zip Code 61008
FEC ID number of contributing federal political committee. **C**
Name of Employer STATE OF ILLINOIS Occupation STATE REPRESENTATIVE
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 250.00
Date of Receipt: 11 / 03 / 2009
Transaction ID: SA11AI.5144
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) **3650.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD J WEHMER

Mailing Address 454 BUENA RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
WINTRUST FINANCIAL CORPORATION PRESIDENT/CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	9

Transaction ID: SA11AI.5985

Amount of Each Receipt this Period
500.00

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

Mailing Address 21 S CLARK ST #3140

City State Zip Code
CHICAGO IL 60603

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

Name of Employer Occupation
JUDD ENTERPRISES INC CHAIRMAN & CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.6159

Amount of Each Receipt this Period
500.00

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

Mailing Address 217 W GOETHE

City State Zip Code
CHICAGO IL 60610

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

Name of Employer Occupation
BARNES & THORNBURG LLP ATTORNEY

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	4	/	2	0	0	9

Transaction ID: SA11AI.5435

Amount of Each Receipt this Period
250.00

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 74 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRADFORD WEST

Mailing Address 314 E FOSTER PLACE

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
WEST INSURANCE AGENCY PRESIDENT

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5326

Amount of Each Receipt this Period
250.00

250.00

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

Mailing Address 1035 N SHERIDAN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
DRO WST TRADING Investment Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.5127

Amount of Each Receipt this Period
250.00

250.00

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

Mailing Address 1050 N GREEN BAY RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2010 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 9

Transaction ID: SA11AI.5126

Amount of Each Receipt this Period
500.00

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 75 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID WOOD

Mailing Address 6 BRIARWOOD LN

City State Zip Code
LINCOLNSHIRE IL 60069

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

Name of Employer Occupation
U S BANK BANKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.6058

Amount of Each Receipt this Period
250.00

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

Mailing Address 1419 BERKLEY CT

City State Zip Code
DEERFIELD IL 60015

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

Name of Employer Occupation
HARRIS BANK BANKER

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5394

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
PAUL R WOOD

Mailing Address 191 N MAYFLOWER RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
MADISON DEARBORN PARTNERS MANAGING DIRECTOR

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.5320

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **4650.00**

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 76 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD WRIGHT

Mailing Address 1905 S BUCHANAN ST

City State Zip Code
KENNEWICK WA 99338

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

Name of Employer Occupation
COLUMBIA PT INC PHYSICAL THERAPIST

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.5924

Amount of Each Receipt this Period
1000.00

1000.00

B. Full Name (Last, First, Middle Initial)
NANCY L YOUNG

Mailing Address 3111 N SOUTHERN HILLS DR

City State Zip Code
WADSWORTH IL 60063

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5518

Amount of Each Receipt this Period
500.00

525.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ► **161863.50**

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - AMERICAN UROLOGICAL ASSOCIATION PAC
Mailing Address 1100 E. Woodfield Road, Suite 520

City State Zip Code
SCHAUMBURG IL 60173

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y Y
11 / 09 / 2009

Transaction ID: SA11C.5193

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE
Mailing Address 2400 N St NW

City State Zip Code
Washington DC 20037

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: SA11C.5880

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE
Mailing Address 1891 Preston White Drive

City State Zip Code
Reston VA 20191

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y Y
11 / 19 / 2009

Transaction ID: SA11C.5376

Amount of Each Receipt this Period
5000.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14th Street, NW
Suite 1100

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 01 / 2009
Transaction ID: SA11C.5814
 Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. POLITICAL ACTION COMMITTEE (ACTP)

Mailing Address 4720 Montgomery Lane
PO Box 31220

City Bethesda State MD Zip Code 20824

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 13 / 2009
Transaction ID: SA11C.5309
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC

Mailing Address 2200 Research Boulevard

City Rockville State MD Zip Code 20850

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11C.5018
 Amount of Each Receipt this Period: 1000.00

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC
 Mailing Address 2200 Research Boulevard
 City State Zip Code
 Rockville MD 20850
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 9
Transaction ID: SA11C.6023
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

B. Full Name (Last, First, Middle Initial)
BRICKMAN GROUP POLITICAL ACTION COMMITTEE
 Mailing Address 18227D Flower Hill Way
 City State Zip Code
 Gaithersburg MD 20879
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 1 / 2 0 0 9
Transaction ID: SA11C.6351
 Amount of Each Receipt this Period
 4500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 4500.00

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR BILL BLACK
 Mailing Address P O BOX 344
 City State Zip Code
 DANVILLE IL 61834
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 9
Transaction ID: SA11C.5997
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

SUBTOTAL of Receipts This Page (optional) ► **5750.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 80 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR MARGARET PARCELLS
Mailing Address 323 DICKENS ST
City NORTHFIELD State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 10 / 04 / 2009
Transaction ID: SA11C.4906
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR MOFFITT
Mailing Address P O BOX 94
City KNOXVILLE State IL Zip Code 61448
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 11 / 09 / 2009
Transaction ID: SA11C.5178
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR MYERS
Mailing Address P O BOX 694
City MACOMB State IL Zip Code 61455
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 11 / 09 / 2009
Transaction ID: SA11C.5202
Amount of Each Receipt this Period 250.00

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 81 / 146

(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
CITIZENS FOR PAMELA J ALTHOFF

Mailing Address P O BOX 2275

City State Zip Code
MCHENRY IL 60050

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 100.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11C.6126

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
CITIZENS FOR PETERSON CAMPAIGN COMMITTEE

Mailing Address 514 LONGFIELD LN

City State Zip Code
GRAYSLAKE IL 60030

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11C.5374

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
CITIZENS TO ELECT JAMES K BOORAS FOR JUDGE

Mailing Address 900 NORTH SHORE DR #150

City State Zip Code
LAKE BLUFF IL 60044

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 50.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11C.6161

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
CITIZENS TO ELECT TOM CROSS

Mailing Address 24047 W LOCKPORT ST

City State Zip Code
PLAINFIELD IL 60544

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11C.6026

Amount of Each Receipt this Period

750.00

B.

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT MICHAEL BOST

Mailing Address P O BOX 553

City State Zip Code
DANVILLE IL 62903

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11C.5999

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE, THE

Mailing Address 701 Pennsylvania Avenue, NW
Suite 750

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11C.5836

Amount of Each Receipt this Period

1000.00

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
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FOR LINE NUMBER: PAGE 83 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DISCOVER FINANCIAL SERVICES POLITICAL ACTION COMMITTEE

Mailing Address 500 8TH STREET NW SUITE 210

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00438051

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: SA11C.5259
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
DRINKER BIDDLE POLITICAL ACTION COMMITTEE

Mailing Address 1500 K Street NW Suite 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00370759

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 13 / 2009
Transaction ID: SA11C.5294
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 Townsend Street Suite 900

City Lansing State MI Zip Code 48933

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 12 / 14 / 2009
Transaction ID: SA11C.6024
 Amount of Each Receipt this Period: 1000.00

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
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS FOR POE
Mailing Address P O BOX 8862
City SPRINGFIELD State IL Zip Code 62791
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 11 / 13 / 2009
Transaction ID: SA11C.5261
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
GLAXOSMITHKLINE LLC POLITICAL ACTION COMMITTEE (FKA SMITHKLINE BEECHAM CORP. PAC)
Mailing Address Five Moore Drive P.O. Box 13358
P.O. Box 13358
City Res. Triangle Park State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 21 / 2009
Transaction ID: SA11C.5850
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
GROWTH AND PROSPERITY POLITICAL ACTION COMMITTEE
Mailing Address 831 Linwood Court
Suite 300
City Birmingham State AL Zip Code 35222
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 12 / 31 / 2009
Transaction ID: SA11C.5873
Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6250.00
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 85 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARTMARX CORPORATION GOVERNMENT RELATIONS FUND

Mailing Address 101 North Wacker Drive

City State Zip Code
Chicago IL 60606

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	9

Transaction ID: SA11C.5204

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
KEITH SOMMER CAMPAIGN COMMITTEE

Mailing Address 600 N MISSOURI

City State Zip Code
MORTON IL 61550

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	9

Transaction ID: SA11C.6339

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
MIKE R FUND

Mailing Address P O BOX 2485

City State Zip Code
SPRINGFIELD VA 22152

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: SA11C.5878

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 86 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NOVARTIS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 701 Pennsylvania Ave. NW Suite 725
Suite 725

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 27 / 2009
Transaction ID: SA11C.5461

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
PEOPLE FOR EDDY

Mailing Address P O BOX 277

City HUTSONVILLE State IL Zip Code 62433

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 09 / 2009
Transaction ID: SA11C.5180

Amount of Each Receipt this Period: 500.00

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

Mailing Address 1101 Skokie Boulevard
Suite 400

City Northbrook State IL Zip Code 60062

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 23 / 2009
Transaction ID: SA11C.5853

Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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 87 / 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REHABCARE GROUP INC PAC

Mailing Address 7733 FORSYTH BLVD SUITE 2300
ATTN: PAC PRESIDENT

City State Zip Code
ST LOUIS MO 63105

FEC ID number of contributing federal political committee. **C** C00407130

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: SA11C.4988

Amount of Each Receipt this Period
1000.00

1000.00

B. Full Name (Last, First, Middle Initial)
SPECIAL EDUCATION ADMINISTRATORS PAC

Mailing Address 5151 W 149TH ST

City State Zip Code
OAK FOREST IL 60452

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	9

Transaction ID: SA11C.6100

Amount of Each Receipt this Period
250.00

250.00

Contribution refunded 01/-29/2010

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

Mailing Address 104 WILMOT ROAD MS #1447

City State Zip Code
DEERFIELD IL 60015

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	0	9

Transaction ID: SA11C.5865

Amount of Each Receipt this Period
1000.00

1000.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

TOTAL This Period (last page this line number only) ► **40150.00**

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 146
(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
ELIZABETH COULSON

Mailing Address 1701 SEQUOIA TRAIL

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing federal political committee. **C** H0IL10294

Name of Employer Occupation
STATE OF ILLINOIS STATE REPRESENTATIVE

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 90000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 9

Transaction ID: SA13A.5643

Amount of Each Receipt this Period
40000.00

LOAN FROM CANDIDATE

SUBTOTAL of Receipts This Page (optional)	▶	40000.00
TOTAL This Period (last page this line number only)	▶	40000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A T & T	Transaction ID: SB17.5628 Date of Disbursement 11 / 12 / 2009
	Mailing Address P O BOX 8100	Amount of Each Disbursement this Period 251.36
	City AURORA State IL Zip Code 60507	
	Purpose of Disbursement Telephone & Internet Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) A T & T	Transaction ID: SB17.5963 Date of Disbursement 11 / 21 / 2009
	Mailing Address P O BOX 8100	Amount of Each Disbursement this Period 499.33
	City AURORA State IL Zip Code 60507	
	Purpose of Disbursement Telephone & Internet Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) A T & T	Transaction ID: SB17.5918 Date of Disbursement 12 / 21 / 2009
	Mailing Address P O BOX 8100	Amount of Each Disbursement this Period 486.57
	City AURORA State IL Zip Code 60507	
	Purpose of Disbursement Telephone & Internet Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

1237.26

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) A T & T MOBILITY</p> <p>Mailing Address P 0 BOX 6428</p> <p>City CAROL STREAM State IL Zip Code 60197</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5595</p> <p>Date of Disbursement 10 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) A T & T MOBILITY</p> <p>Mailing Address P 0 BOX 6428</p> <p>City CAROL STREAM State IL Zip Code 60197</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5631</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 233.07</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) A T & T MOBILITY</p> <p>Mailing Address P 0 BOX 6428</p> <p>City CAROL STREAM State IL Zip Code 60197</p> <p>Purpose of Disbursement TELEPHONE</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5632</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 281.17</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

814.24

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
A T & T MOBILITY

Transaction ID: SB17.5964
Date of Disbursement

Mailing Address P 0 BOX 6428

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

City State Zip Code
CAROL STREAM IL 60197

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
TELEPHONE

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
A T & T MOBILITY

Transaction ID: SB17.5915
Date of Disbursement

Mailing Address P 0 BOX 6428

^M 1	^M 2	/	^D 1	^D 6	/	^Y 2	^Y 0	^Y 9	^Y 9
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City State Zip Code
CAROL STREAM IL 60197

Amount of Each Disbursement this Period

233.18

Purpose of Disbursement
TELEPHONE

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
A T & T MOBILITY

Transaction ID: SB17.5916
Date of Disbursement

Mailing Address P 0 BOX 6428

^M 1	^M 2	/	^D 1	^D 6	/	^Y 2	^Y 0	^Y 9	^Y 9
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City State Zip Code
CAROL STREAM IL 60197

Amount of Each Disbursement this Period

238.27

Purpose of Disbursement
TELEPHONE

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

671.45

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

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
AUTHORIZENET

Transaction ID: SB17.6411
Date of Disbursement

Mailing Address 1295 CHARLESTON RD

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	0	9

City MOUNTAIN VIEW State CA Zip Code 94043

Amount of Each Disbursement this Period

Purpose of Disbursement
CREDIT CARD FEES

001
Category/
Type

38.20

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
BARNES & THORNBURG LLP

Transaction ID: SB17.5981
Date of Disbursement

Mailing Address 1 N WACKER DR

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	9

City CHICAGO State IL Zip Code 60602

Amount of Each Disbursement this Period

Purpose of Disbursement
Catering - Fundraiser

003
Category/
Type

1036.41

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5063
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary - Campaign Manager

001
Category/
Type

1750.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

2824.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5064
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Salary - Campaign Manager

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5088
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Salary - Campaign Manager

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5585
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Salary - Campaign Manager

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5949
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary - Campaign Manager

001
Category/ Type

2500.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5975
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary - Campaign Manager

001
Category/ Type

2500.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
JENNIFER BELKOV

Transaction ID: SB17.5903
Date of Disbursement

Mailing Address 6444 LYONS ST

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	9

City MORTON GROVE State IL Zip Code 60053

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary - Campaign Manager

001
Category/ Type

2500.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. BELLWEATHER RESEARCH & CONSULTING

Full Name (Last, First, Middle Initial)

Mailing Address 804 N OVERLOOK DR

City ALEXANDRIA State VA Zip Code 22305

Purpose of Disbursement

Polling Expense

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5887

Date of Disbursement

12 / 31 / 2009

Amount of Each Disbursement this Period

5135.00

B. CHICAGO JEWISH NEWS THE

Full Name (Last, First, Middle Initial)

Mailing Address 5301 W DEMPSTER

City SKOKIE State IL Zip Code 60077

Purpose of Disbursement

Advertising

Candidate Name

COULSON FOR CONGRESS

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5940

Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

238.00

C. CHICAGO JEWISH STAR

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 268

City SKOKIE State IL Zip Code 60076

Purpose of Disbursement

Advertising

Candidate Name

COULSON FOR CONGRESS

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5898

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

126.00

SUBTOTAL of Disbursements This Page (optional) ▶

5499.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
COSTCO

Transaction ID: SB17.6457
Date of Disbursement

Mailing Address 2900 PATRIOT BLVD

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	9

City GLENVIEW State IL Zip Code 60026

Amount of Each Disbursement this Period

166.06

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
COSTCO

Transaction ID: SB17.6402
Date of Disbursement

Mailing Address 2900 PATRIOT BLVD

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	9

City GLENVIEW State IL Zip Code 60026

Amount of Each Disbursement this Period

146.70

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
CYBERSOURCE INC

Transaction ID: SB17.5036
Date of Disbursement

Mailing Address 1295 CHARLESTON RD

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	9

City MOUNTAIN VIEW State CA Zip Code 94043

Amount of Each Disbursement this Period

193.47

Purpose of Disbursement
CREDIT CARD FEES

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

506.23

TOTAL This Period (last page this line number only)

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5037 Date of Disbursement 10 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 33.24
B.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5038 Date of Disbursement 10 / 14 / 2009 <hr/> Amount of Each Disbursement this Period 14.45
C.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5039 Date of Disbursement 10 / 21 / 2009 <hr/> Amount of Each Disbursement this Period 1.19

SUBTOTAL of Disbursements This Page (optional) ▶	48.88
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) CYBERSOURCE INC Mailing Address 1295 CHARLESTON RD City MOUNTAIN VIEW State CA Zip Code 94043 Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5040 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 17.34 Category/Type: 001
B. Full Name (Last, First, Middle Initial) CYBERSOURCE INC Mailing Address 1295 CHARLESTON RD City MOUNTAIN VIEW State CA Zip Code 94043 Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5041 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 29.62 Category/Type: 001
C. Full Name (Last, First, Middle Initial) CYBERSOURCE INC Mailing Address 1295 CHARLESTON RD City MOUNTAIN VIEW State CA Zip Code 94043 Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5042 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 28.90 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶

75.86

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC	Transaction ID: SB17.5043 Date of Disbursement																			
	Mailing Address 1295 CHARLESTON RD	<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>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	0	/	2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	0	/	2	0	9													
	City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD FEES	<table border="1"><tr><td>3.39</td></tr></table>	3.39																		
3.39																					
	Candidate Name COULSON FOR CONGRESS	001 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC	Transaction ID: SB17.5600 Date of Disbursement																			
	Mailing Address 1295 CHARLESTON RD	<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>3</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	3	/	2	0	9													
	City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD FEES	<table border="1"><tr><td>21.73</td></tr></table>	21.73																		
21.73																					
	Candidate Name COULSON FOR CONGRESS	001 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC	Transaction ID: SB17.6414 Date of Disbursement																			
	Mailing Address 1295 CHARLESTON RD	<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>4</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	4	/	2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	4	/	2	0	9													
	City MOUNTAIN VIEW State CA Zip Code 94043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CREDIT CARD FEES	<table border="1"><tr><td>61.41</td></tr></table>	61.41																		
61.41																					
	Candidate Name COULSON FOR CONGRESS	001 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>86.53</td></tr></table>	86.53
86.53		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 / 146

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6415 Date of Disbursement 11 / 25 / 2009	Amount of Each Disbursement this Period 0.45
B.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6416 Date of Disbursement 11 / 25 / 2009	Amount of Each Disbursement this Period 4.90
C.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5984 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 188.59

SUBTOTAL of Disbursements This Page (optional) ▶

193.94

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6412 Date of Disbursement 12 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 29.28
B.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6380 Date of Disbursement 12 / 07 / 2009 <hr/> Amount of Each Disbursement this Period 50.49
C.	Full Name (Last, First, Middle Initial) CYBERSOURCE INC <hr/> Mailing Address 1295 CHARLESTON RD <hr/> City MOUNTAIN VIEW State CA Zip Code 94043 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5941 Date of Disbursement 12 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 326.36

SUBTOTAL of Disbursements This Page (optional) ▶

406.13

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JAMES DANGELO	Transaction ID: SB17.5111 Date of Disbursement 10 / 19 / 2009
	Mailing Address 222 E PEARSON	
	City CHICAGO State IL Zip Code 60611	Amount of Each Disbursement this Period 177.50
	Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

B.	Full Name (Last, First, Middle Initial) JAMES DANGELO	Transaction ID: SB17.5597 Date of Disbursement 10 / 30 / 2009
	Mailing Address 222 E PEARSON	
	City CHICAGO State IL Zip Code 60611	Amount of Each Disbursement this Period 55.00
	Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

C.	Full Name (Last, First, Middle Initial) JAMES DANGELO	Transaction ID: SB17.5979 Date of Disbursement 11 / 30 / 2009
	Mailing Address 222 E PEARSON	
	City CHICAGO State IL Zip Code 60611	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	482.50
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JAMES DANVELO

Transaction ID: SB17.5909
Date of Disbursement

Mailing Address 222 E PEARSON

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	9	

City CHICAGO State IL Zip Code 60611

Amount of Each Disbursement this Period

120.00

Purpose of Disbursement
Salary - Campaign Staff

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
DANWAL INC

Transaction ID: SB17.5633
Date of Disbursement

Mailing Address 12404 HWY 155 S

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	9	

City TYLER State TX Zip Code 75703

Amount of Each Disbursement this Period

513.46

Purpose of Disbursement
PROMOTIONAL ITEMS - SWEATSHIRTS

006
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
DICK STONE COMMUNICATIONS

Transaction ID: SB17.5884
Date of Disbursement

Mailing Address 1954 FIRST ST

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	9	

City HIGHLAND PARK State IL Zip Code 60035

Amount of Each Disbursement this Period

4000.00

Purpose of Disbursement
Media Consultant

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

4633.46

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) PHILIP DUCATO <hr/> Mailing Address 640 OGDEN AVE <hr/> City Downers Grove State IL Zip Code 60515 <hr/> Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5978 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) PHILIP DUCATO <hr/> Mailing Address 640 OGDEN AVE <hr/> City Downers Grove State IL Zip Code 60515 <hr/> Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5897 Date of Disbursement 12 / 03 / 2009	Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) PHILIP DUCATO <hr/> Mailing Address 640 OGDEN AVE <hr/> City Downers Grove State IL Zip Code 60515 <hr/> Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5910 Date of Disbursement 12 / 14 / 2009	Amount of Each Disbursement this Period 600.00

SUBTOTAL of Disbursements This Page (optional)		1200.00
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ELECT INC		Transaction ID: SB17.5069	
	Mailing Address 2502 N CLARK ST		Date of Disbursement 10 / 05 / 2009	
	City CHICAGO	State IL	Zip Code 60614	Amount of Each Disbursement this Period 8268.75
	Purpose of Disbursement VOTER DATABASE		001	Category/ Type
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				
B.	Full Name (Last, First, Middle Initial) FEDEX KINKOS		Transaction ID: SB17.6393	
	Mailing Address 8810 GROSS POINT RD		Date of Disbursement 12 / 07 / 2009	
	City SKOKIE	State IL	Zip Code 60077	Amount of Each Disbursement this Period 138.45
	Purpose of Disbursement PRINTING		006	Category/ Type
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				
C.	Full Name (Last, First, Middle Initial) FOREST BECVAR INSURANCE AGENCY		Transaction ID: SB17.5078	
	Mailing Address 10055 W ROOSEVELT RD STE A		Date of Disbursement 10 / 07 / 2009	
	City WESTCHESTER	State IL	Zip Code 60154	Amount of Each Disbursement this Period 450.00
	Purpose of Disbursement INSURANCE		001	Category/ Type
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				

SUBTOTAL of Disbursements This Page (optional) ▶

8857.20

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)

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
ARTHUR S GOLD

Mailing Address 1200 N SHERIDAN RD

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement
In-kind - Catering Fundraiser

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.6495
Date of Disbursement

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

Amount of Each Disbursement this Period

1071.75

B.

Full Name (Last, First, Middle Initial)
GULA GRAHAM GROUP THE

Mailing Address 700 12TH ST NW STE 700

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
FUNDRAISER

Candidate Name
COULSON FOR CONGRESS

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5603
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	9

Amount of Each Disbursement this Period

436.16

C.

Full Name (Last, First, Middle Initial)
STAR CATERING

Mailing Address 2002 MT VERNON AVE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
CATERING - FUNDRAISER

Candidate Name
COULSON FOR CONGRESS

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5603.2
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	9

Amount of Each Disbursement this Period

257.19

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1507.91

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

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
GULA GRAHAM GROUP THE

Transaction ID: SB17.5948

Date of Disbursement

Mailing Address 700 12TH ST NW STE 700

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	0	9

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Fundraising Consultant

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
GULA GRAHAM GROUP THE

Transaction ID: SB17.5980

Date of Disbursement

Mailing Address 700 12TH ST NW STE 700

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
Fundraising Consultant

003
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
HACKNEYS ON LAKE

Transaction ID: SB17.5594

Date of Disbursement

Mailing Address 1514 E LAKE AVE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	9

City GLENVIEW State IL Zip Code 60025

Amount of Each Disbursement this Period

35.78

Purpose of Disbursement
Catering - Fundraiser Balance

003
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

SUBTOTAL of Disbursements This Page (optional) ▶

1385.78

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

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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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
HACKNEYS ON LAKE

Mailing Address 1514 E LAKE AVE

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
DINNER EXPENSE

007
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.6475
Date of Disbursement

11 / 21 / 2009

Amount of Each Disbursement this Period

203.31

B.

Full Name (Last, First, Middle Initial)
MARGARET HEYDT

Mailing Address 331 W WEBSTER PLACE

City CHICAGO State IL Zip Code 60614

Purpose of Disbursement
Salary - Campaign Staff

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5058
Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

1300.00

C.

Full Name (Last, First, Middle Initial)
MARGARET HEYDT

Mailing Address 331 W WEBSTER PLACE

City CHICAGO State IL Zip Code 60614

Purpose of Disbursement
Salary - Campaign Staff

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5092
Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

1625.00

SUBTOTAL of Disbursements This Page (optional)

3128.31

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
MARGARET HEYDT

Mailing Address 331 W WEBSTER PLACE

City CHICAGO State IL Zip Code 60614

Purpose of Disbursement
Salary - Campaign Staff

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5596
Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

812.50

B.

Full Name (Last, First, Middle Initial)
ITALIAN KITCHEN

Mailing Address 648 DEERFIELD RD

City DEERFIELD State IL Zip Code 60091

Purpose of Disbursement
Catering - Fundraiser

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5957
Date of Disbursement

11 / 17 / 2009

Amount of Each Disbursement this Period

573.51

C.

Full Name (Last, First, Middle Initial)
KAREN JACOBSEN

Mailing Address 1764 CANTERBURY TRAIL

City PALATINE State IL Zip Code 60074

Purpose of Disbursement
Accounting Services

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5059
Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

4386.01

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) KAREN JACOBSEN</p> <p>Mailing Address 1764 CANTERBURY TRAIL</p> <p>City PALATINE State IL Zip Code 60074</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.6385</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="900.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) KAREN JACOBSEN</p> <p>Mailing Address 1764 CANTERBURY TRAIL</p> <p>City PALATINE State IL Zip Code 60074</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5089</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) KAREN JACOBSEN</p> <p>Mailing Address 1764 CANTERBURY TRAIL</p> <p>City PALATINE State IL Zip Code 60074</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name COULSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.5586</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3900.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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 111 / 146

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
KAREN JACOBSEN

Transaction ID: SB17.5630
Date of Disbursement

Mailing Address 1764 CANTERBURY TRAIL

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	9

City PALATINE State IL Zip Code 60074

Amount of Each Disbursement this Period

Purpose of Disbursement
Accounting Services

001
Category/
Type

1500.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
KAREN JACOBSEN

Transaction ID: SB17.5976
Date of Disbursement

Mailing Address 1764 CANTERBURY TRAIL

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City PALATINE State IL Zip Code 60074

Amount of Each Disbursement this Period

Purpose of Disbursement
Accounting Services

001
Category/
Type

1500.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
KAREN JACOBSEN

Transaction ID: SB17.5904
Date of Disbursement

Mailing Address 1764 CANTERBURY TRAIL

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	9

City PALATINE State IL Zip Code 60074

Amount of Each Disbursement this Period

Purpose of Disbursement
Accounting Services

001
Category/
Type

1500.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5061
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5091
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5587
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5983
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5971
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
ANDREW KRETSCHMAR

Transaction ID: SB17.5902
Date of Disbursement

Mailing Address 853 N QUENTIN RD #142

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	9

City PALATINE State IL Zip Code 60067

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
Salary - Campaign Office Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
State: IL District: 10
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3750.00

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

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**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 114 / 146

<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) KSD PROPERTIES INC <hr/> Mailing Address 1955 SHERMER RD <hr/> City NORTHBROOK State IL Zip Code 60062 <hr/> Purpose of Disbursement Office Rent Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5054 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00
B.	Full Name (Last, First, Middle Initial) KSD PROPERTIES INC <hr/> Mailing Address 1955 SHERMER RD <hr/> City NORTHBROOK State IL Zip Code 60062 <hr/> Purpose of Disbursement Office Rent Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5598 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00
C.	Full Name (Last, First, Middle Initial) KSD PROPERTIES INC <hr/> Mailing Address 1955 SHERMER RD <hr/> City NORTHBROOK State IL Zip Code 60062 <hr/> Purpose of Disbursement Office Rent Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5883 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional)		9000.00
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) LAKE COUNTY REPUBLICAN FEDERATION <hr/> Mailing Address 320 PETERSON RD <hr/> City LIBERTYVILLE State IL Zip Code 60048 <hr/> Purpose of Disbursement Donation Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5612 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) LAKE COUNTY REPUBLICAN FEDERATION <hr/> Mailing Address 320 PETERSON RD <hr/> City LIBERTYVILLE State IL Zip Code 60048 <hr/> Purpose of Disbursement DONATION Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5614 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 700.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MAC CONSULTING <hr/> Mailing Address 3611 S 55TH CT <hr/> City CICERO State IL Zip Code 60804 <hr/> Purpose of Disbursement Media Consultant Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5960 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 750.00
	<input type="text" value="001"/> Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MAC CONSULTING		Transaction ID: SB17.5973	
	Mailing Address 3611 S 55TH CT		Date of Disbursement 11 / 30 / 2009	
	City CICERO	State IL	Zip Code 60804	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Media Consultant		001 Category/ Type	
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				
B.	Full Name (Last, First, Middle Initial) MAC CONSULTING		Transaction ID: SB17.5900	
	Mailing Address 3611 S 55TH CT		Date of Disbursement 12 / 12 / 2009	
	City CICERO	State IL	Zip Code 60804	Amount of Each Disbursement this Period 610.00
	Purpose of Disbursement Media Consultant		001 Category/ Type	
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				
C.	Full Name (Last, First, Middle Initial) MAC CONSULTING		Transaction ID: SB17.5901	
	Mailing Address 3611 S 55TH CT		Date of Disbursement 12 / 14 / 2009	
	City CICERO	State IL	Zip Code 60804	Amount of Each Disbursement this Period 1250.00
	Purpose of Disbursement Media Consultant		001 Category/ Type	
Candidate Name COULSON FOR CONGRESS				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IL District: 10				

SUBTOTAL of Disbursements This Page (optional)	2610.00
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MASTERCARD			Transaction ID: SB17.5640 Date of Disbursement																						
	Mailing Address BOX 6062			<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>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y																
	1	2		1	5		2	0	0	9																
City SIOUX FALLS		State SD	Zip Code 57117		Amount of Each Disbursement this Period 682.40																					
Purpose of Disbursement AIRLINE TRAVEL CANDIDATE & 1 STAFF			002 Category/ Type																							
Candidate Name COULSON FOR CONGRESS			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																							
Disbursement For: 2010			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: IL District: 10																										
B.	Full Name (Last, First, Middle Initial) ABBY MILONE			Transaction ID: SB17.5605 Date of Disbursement																						
	Mailing Address 4243 N KEYSTONE 1S			<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>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y																
	1	0		3	0		2	0	0	9																
City CHICAGO		State IL	Zip Code 60641		Amount of Each Disbursement this Period 250.00																					
Purpose of Disbursement Salary - Campaign Office Staff			001 Category/ Type																							
Candidate Name COULSON FOR CONGRESS			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																							
Disbursement For: 2010			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: IL District: 10																										
C.	Full Name (Last, First, Middle Initial) ABBY MILONE			Transaction ID: SB17.5951 Date of Disbursement																						
	Mailing Address 4243 N KEYSTONE 1S			<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>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y																
	1	1		1	4		2	0	0	9																
City CHICAGO		State IL	Zip Code 60641		Amount of Each Disbursement this Period 125.00																					
Purpose of Disbursement Salary - Campaign Office Staff			001 Category/ Type																							
Candidate Name COULSON FOR CONGRESS			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President																							
Disbursement For: 2010			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: IL District: 10																										

SUBTOTAL of Disbursements This Page (optional)	▶	1057.40
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEW TRIER REPUBLICAN ORGANIZATION

Mailing Address 509 PARK DRIVE

City State Zip Code
KENILWORTH IL 60043

Purpose of Disbursement
EVENT TICKETS - AD BOOK

011
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

Transaction ID: SB17.5081
Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

1500.00

B. Full Name (Last, First, Middle Initial)
NORTH SHORE COPIER

Mailing Address 4300 REGENCY DRIVE

City State Zip Code
GLENVIEW IL 60025

Purpose of Disbursement
COPIER RENTAL

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

Transaction ID: SB17.5074
Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

637.00

C. Full Name (Last, First, Middle Initial)
NORTH SHORE COPIER

Mailing Address 4300 REGENCY DRIVE

City State Zip Code
GLENVIEW IL 60025

Purpose of Disbursement
COPIER RENTAL

001
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

Transaction ID: SB17.5889
Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

269.00

SUBTOTAL of Disbursements This Page (optional) ▶

2406.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NYHAN DANIELS & FRIENDS LLC

Mailing Address 1844 WILDBERRY DR

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
FUNDRAISER - CONSULTANT

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5060

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Amount of Each Disbursement this Period

4500.00

B. Full Name (Last, First, Middle Initial)
NYHAN DANIELS & FRIENDS LLC

Mailing Address 1844 WILDBERRY DR

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
FUNDRAISER - CONSULTANT

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5607

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	9

Amount of Each Disbursement this Period

4500.00

C. Full Name (Last, First, Middle Initial)
NYHAN DANIELS & FRIENDS LLC

Mailing Address 1844 WILDBERRY DR

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
FUNDRAISER - CONSULTANT

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.5882

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	9

Amount of Each Disbursement this Period

4500.00

SUBTOTAL of Disbursements This Page (optional) ►

13500.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) PATTON BOGGS <hr/> Mailing Address 2550 M ST NW <hr/> City WASHINGTON State DC Zip Code 20037 <hr/> Purpose of Disbursement Legal Fees 001 Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.5616 Date of Disbursement 11 / 06 / 2009	
	Amount of Each Disbursement this Period 1007.90	
	Full Name (Last, First, Middle Initial) PATTON BOGGS <hr/> Mailing Address 2550 M ST NW <hr/> City WASHINGTON State DC Zip Code 20037 <hr/> Purpose of Disbursement Legal Fees 001 Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.5966 Date of Disbursement 11 / 22 / 2009
	Amount of Each Disbursement this Period 1029.00	
C. Full Name (Last, First, Middle Initial) PATTON BOGGS <hr/> Mailing Address 2550 M ST NW <hr/> City WASHINGTON State DC Zip Code 20037 <hr/> Purpose of Disbursement Legal Fees 001 Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.5919 Date of Disbursement 12 / 21 / 2009	
Amount of Each Disbursement this Period 1008.47		

SUBTOTAL of Disbursements This Page (optional) ▶

3045.37

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
MARK PEREZ

Transaction ID: SB17.5096
Date of Disbursement

Mailing Address 3030 W FLETCHER AVE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	9

City CHICAGO State IL Zip Code 60618

Amount of Each Disbursement this Period

305.00

Purpose of Disbursement
Salary - Campaign Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
MARK PEREZ

Transaction ID: SB17.5588
Date of Disbursement

Mailing Address 3030 W FLETCHER AVE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

City CHICAGO State IL Zip Code 60618

Amount of Each Disbursement this Period

180.00

Purpose of Disbursement
Salary - Campaign Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
SCHARFENBERGER COMPANY

Transaction ID: SB17.5608
Date of Disbursement

Mailing Address 2534 COMMERCE BLVD

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	9

City SHARONVILLE State OH Zip Code 45241

Amount of Each Disbursement this Period

5922.68

Purpose of Disbursement
Yard Signs

006

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

6407.68

TOTAL This Period (last page this line number only)

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) JUSTIN SHIMKO <hr/> Mailing Address 423 S 7TH ST <hr/> City ST CHARLES State IL Zip Code 60174 <hr/> Purpose of Disbursement Salary - Campaign Office Staff Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JUSTIN SHIMKO <hr/> Mailing Address 423 S 7TH ST <hr/> City ST CHARLES State IL Zip Code 60174 <hr/> Purpose of Disbursement Salary - Campaign Office Staff Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5972 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JUSTIN SHIMKO <hr/> Mailing Address 423 S 7TH ST <hr/> City ST CHARLES State IL Zip Code 60174 <hr/> Purpose of Disbursement Salary - Campaign Office Staff Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5907 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ROBERT SOUDAN	Transaction ID: SB17.6493 Date of Disbursement 11 / 17 / 2009	
	Mailing Address 110 SHERIDAN RD		
	City WINNETKA State IL Zip Code 60093	Amount of Each Disbursement this Period	1071.75
	Purpose of Disbursement In-kind - Catering Fundraiser		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: SB17.5087 Date of Disbursement 10 / 11 / 2009	
	Mailing Address 1509 WAUKEGAN RD		
	City GLENVIEW State IL Zip Code 60025	Amount of Each Disbursement this Period	50.85
	Purpose of Disbursement OFFICE SUPPLIES		
	Candidate Name COULSON FOR CONGRESS	Category/Type	001
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: IL District: 10		
C.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: SB17.5086 Date of Disbursement 10 / 12 / 2009	
	Mailing Address 1509 WAUKEGAN RD		
	City GLENVIEW State IL Zip Code 60025	Amount of Each Disbursement this Period	74.51
	Purpose of Disbursement OFFICE SUPPLIES		
	Candidate Name COULSON FOR CONGRESS	Category/Type	001
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: IL District: 10		

SUBTOTAL of Disbursements This Page (optional) ▶

1197.11

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: SB17.5097	
	Mailing Address 1509 WAUKEGAN RD	Date of Disbursement 10 / 19 / 2009	
	City GLENVIEW State IL Zip Code 60025	Amount of Each Disbursement this Period 23.01	
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: SB17.6445	
	Mailing Address 1509 WAUKEGAN RD	Date of Disbursement 10 / 19 / 2009	
	City GLENVIEW State IL Zip Code 60025	Amount of Each Disbursement this Period 77.53	
	Purpose of Disbursement Office Supplies Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: SB17.6450	
	Mailing Address 1509 WAUKEGAN RD	Date of Disbursement 10 / 30 / 2009	
	City GLENVIEW State IL Zip Code 60025	Amount of Each Disbursement this Period 107.13	
	Purpose of Disbursement Office Supplies Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

207.67

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

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

Use separate schedule(s)
for each category of the
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5610 Date of Disbursement: 11 / 07 / 2009	Amount of Each Disbursement this Period 384.38
B.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5618 Date of Disbursement: 11 / 12 / 2009	Amount of Each Disbursement this Period 48.55
C.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6465 Date of Disbursement: 11 / 12 / 2009	Amount of Each Disbursement this Period 173.97

SUBTOTAL of Disbursements This Page (optional)	606.90
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5955 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 9	Amount of Each Disbursement this Period 153.68
B.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6484 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 10.97
C.	Full Name (Last, First, Middle Initial) SYLVESTER MANAGEMENT CORP <hr/> Mailing Address P O BOX 986 <hr/> City IRMA State SC Zip Code 29063 <hr/> Purpose of Disbursement SEMINAR Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5123 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 550.00

SUBTOTAL of Disbursements This Page (optional)			714.65
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)

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<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) TRATTORIA POMIGLIANO <hr/> Mailing Address 602 N MILWAUKEE AVE <hr/> City LIBERTYVILLE State IL Zip Code 60048 <hr/> Purpose of Disbursement Catering - Fundraiser Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5913 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1320.80
	Category/ Type 003
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) U S POST OFFICE <hr/> Mailing Address 1400 PATRIOT BLVD <hr/> City GLENVIEW State IL Zip Code 60626 <hr/> Purpose of Disbursement Postage Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5112 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 396.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) U S POST OFFICE <hr/> Mailing Address 1400 PATRIOT BLVD <hr/> City GLENVIEW State IL Zip Code 60626 <hr/> Purpose of Disbursement Postage Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5589 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 264.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1980.80

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) U S POST OFFICE <hr/> Mailing Address 1400 PATRIOT BLVD <hr/> City GLENVIEW State IL Zip Code 60626 <hr/> Purpose of Disbursement Postage Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6387 Date of Disbursement 10 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 237.60
B.	Full Name (Last, First, Middle Initial) U S POST OFFICE <hr/> Mailing Address 1400 PATRIOT BLVD <hr/> City GLENVIEW State IL Zip Code 60626 <hr/> Purpose of Disbursement POSTAGE Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5620 Date of Disbursement 11 / 12 / 2009 <hr/> Amount of Each Disbursement this Period 220.00
C.	Full Name (Last, First, Middle Initial) U S POST OFFICE <hr/> Mailing Address 1400 PATRIOT BLVD <hr/> City GLENVIEW State IL Zip Code 60626 <hr/> Purpose of Disbursement POSTAGE Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5967 Date of Disbursement 11 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 420.00

SUBTOTAL of Disbursements This Page (optional) ▶	877.60
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
U S POST OFFICE

Transaction ID: SB17.6401
Date of Disbursement

Mailing Address 1400 PATRIOT BLVD

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

City GLENVIEW State IL Zip Code 60626

Amount of Each Disbursement this Period

Purpose of Disbursement
POSTAGE

006
Category/ Type

221.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
U S POST OFFICE

Transaction ID: SB17.5895
Date of Disbursement

Mailing Address 1400 PATRIOT BLVD

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	9

City GLENVIEW State IL Zip Code 60626

Amount of Each Disbursement this Period

Purpose of Disbursement
POSTAGE

001
Category/ Type

589.07

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
U S POST OFFICE

Transaction ID: SB17.5917
Date of Disbursement

Mailing Address 1400 PATRIOT BLVD

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	9

City GLENVIEW State IL Zip Code 60626

Amount of Each Disbursement this Period

Purpose of Disbursement
POSTAGE

001
Category/ Type

440.00

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

SUBTOTAL of Disbursements This Page (optional)

1250.07

TOTAL This Period (last page this line number only)

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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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING	Transaction ID: SB17.6436 Date of Disbursement 10 / 12 / 2009	
	Mailing Address 1816 GARFIELD AVE		
	City AURORA State IL Zip Code 60506	Amount of Each Disbursement this Period	1082.08
	Purpose of Disbursement Printing Signs & Mailers	006	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING	Transaction ID: SB17.5108 Date of Disbursement 10 / 21 / 2009	
	Mailing Address 1816 GARFIELD AVE		
	City AURORA State IL Zip Code 60506	Amount of Each Disbursement this Period	17956.39
	Purpose of Disbursement Printing Mailpiece	006	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING	Transaction ID: SB17.5627 Date of Disbursement 11 / 01 / 2009	
	Mailing Address 1816 GARFIELD AVE		
	City AURORA State IL Zip Code 60506	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement Media Consulting	001	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	24038.47
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING <hr/> Mailing Address 1816 GARFIELD AVE <hr/> City AURORA State IL Zip Code 60506 <hr/> Purpose of Disbursement Teleforum Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5629 Date of Disbursement 11 / 12 / 2009
	Amount of Each Disbursement this Period 3500.00
	Category/ Type 004
	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING <hr/> Mailing Address 1816 GARFIELD AVE <hr/> City AURORA State IL Zip Code 60506 <hr/> Purpose of Disbursement Website Design Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6437 Date of Disbursement 11 / 12 / 2009
	Amount of Each Disbursement this Period 2200.00
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) VICTORY MEDIA CONSULTING <hr/> Mailing Address 1816 GARFIELD AVE <hr/> City AURORA State IL Zip Code 60506 <hr/> Purpose of Disbursement Printing Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6438 Date of Disbursement 11 / 12 / 2009
	Amount of Each Disbursement this Period 3680.00
	Category/ Type 004
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

9380.00

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

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

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

FOR LINE NUMBER: (check only one)

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<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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5065 Date of Disbursement 10 / 01 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5085 Date of Disbursement 10 / 09 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5090 Date of Disbursement 10 / 15 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS	001 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JOE WOODWARD Mailing Address 6948 40TH PL City BERWYN State IL Zip Code 60402 Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5116 Date of Disbursement 10 / 23 / 2009 Amount of Each Disbursement this Period 1000.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) JOE WOODWARD Mailing Address 6948 40TH PL City BERWYN State IL Zip Code 60402 Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.6379 Date of Disbursement 10 / 30 / 2009 Amount of Each Disbursement this Period 1000.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) JOE WOODWARD Mailing Address 6948 40TH PL City BERWYN State IL Zip Code 60402 Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.5615 Date of Disbursement 11 / 06 / 2009 Amount of Each Disbursement this Period 1000.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JOE WOODWARD

Mailing Address 6948 40TH PL

City BERWYN State IL Zip Code 60402

Purpose of Disbursement
Salary - Campaign Manager

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5947
Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

1000.00

001
Category/
Type

B.

Full Name (Last, First, Middle Initial)
JOE WOODWARD

Mailing Address 6948 40TH PL

City BERWYN State IL Zip Code 60402

Purpose of Disbursement
Salary - Campaign Manager

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5961
Date of Disbursement

11 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

001
Category/
Type

C.

Full Name (Last, First, Middle Initial)
JOE WOODWARD

Mailing Address 6948 40TH PL

City BERWYN State IL Zip Code 60402

Purpose of Disbursement
Salary - Campaign Manager

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.5969
Date of Disbursement

11 / 25 / 2009

Amount of Each Disbursement this Period

1000.00

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5890 Date of Disbursement 12 / 04 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	001 Category/ Type
B.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5894 Date of Disbursement 12 / 11 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	001 Category/ Type
C.	Full Name (Last, First, Middle Initial) JOE WOODWARD	Transaction ID: SB17.5912 Date of Disbursement 12 / 14 / 2009
	Mailing Address 6948 40TH PL	Amount of Each Disbursement this Period 1000.00
	City BERWYN State IL Zip Code 60402	
	Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JOE WOODWARD <hr/> Mailing Address 6948 40TH PL <hr/> City BERWYN State IL Zip Code 60402 <hr/> Purpose of Disbursement Salary - Campaign Manager Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.5920 Date of Disbursement 12 / 21 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) MICHAEL WOODWARD <hr/> Mailing Address 6948 WINDSOR AVE <hr/> City BERWYN State IL Zip Code 60402 <hr/> Purpose of Disbursement Legal Counsel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.5891 Date of Disbursement 12 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) JANNES ZOBUS <hr/> Mailing Address 1001 ROSEMARY TERRACE <hr/> City DEERFIELD State IL Zip Code 60015 <hr/> Purpose of Disbursement Salary - Campaign Staff Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.5082 Date of Disbursement 10 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 150.00

SUBTOTAL of Disbursements This Page (optional) ▶	2150.00
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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JANNES ZOBUS

Transaction ID: SB17.5104
Date of Disbursement

Mailing Address 1001 ROSEMARY TERRACE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	9

City DEERFIELD State IL Zip Code 60015

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Salary - Campaign Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: IL District: 10

B.

Full Name (Last, First, Middle Initial)
JANNES ZOBUS

Transaction ID: SB17.6386
Date of Disbursement

Mailing Address 1001 ROSEMARY TERRACE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	9

City DEERFIELD State IL Zip Code 60015

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
Salary - Campaign Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

C.

Full Name (Last, First, Middle Initial)
JANNES ZOBUS

Transaction ID: SB17.5950
Date of Disbursement

Mailing Address 1001 ROSEMARY TERRACE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	9

City DEERFIELD State IL Zip Code 60015

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
Salary - Campaign Staff

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IL District: 10

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

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**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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JANNES ZOBUS	Transaction ID: SB17.5977 Date of Disbursement 11 / 30 / 2009	
	Mailing Address 1001 ROSEMARY TERRACE		
	City DEERFIELD State IL Zip Code 60015	Amount of Each Disbursement this Period	150.00
	Purpose of Disbursement Salary - Campaign Staff	001	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) JANNES ZOBUS	Transaction ID: SB17.5906 Date of Disbursement 12 / 14 / 2009	
	Mailing Address 1001 ROSEMARY TERRACE		
	City DEERFIELD State IL Zip Code 60015	Amount of Each Disbursement this Period	150.00
	Purpose of Disbursement Salary - Campaign Staff	001	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JANNES ZOBUS	Transaction ID: SB17.5921 Date of Disbursement 12 / 21 / 2009	
	Mailing Address 1001 ROSEMARY TERRACE		
	City DEERFIELD State IL Zip Code 60015	Amount of Each Disbursement this Period	300.00
	Purpose of Disbursement Salary - Campaign Staff	001	Category/Type
	Candidate Name COULSON FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: IL District: 10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	227717.91

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

Transaction ID: SC/10.4240

LOAN SOURCE Full Name (Last, First, Middle Initial)
ELIZABETH COULSON - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 1701 SEQUOIA TRAIL

City GLENVIEW State IL ZIP Code 60025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred: MM DD YY 08 24 2009 Date Due: 12/31/2012 Interest Rate: 0.0000 % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	30000.00
TOTALS This Period (last page in this line only)	▶	

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

Transaction ID: SC/10.4241

LOAN SOURCE Full Name (Last, First, Middle Initial)
ELIZABETH COULSON - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 1701 SEQUOIA TRAIL

City GLENVIEW State IL ZIP Code 60025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred: MM DD YY YY 09 25 20 09
 Date Due: 12/31/2012
 Interest Rate: 0.0000 % (apr)
 Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="20000.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

Transaction ID: SC/10.5643

LOAN SOURCE Full Name (Last, First, Middle Initial)
ELIZABETH COULSON - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 1701 SEQUOIA TRAIL

City GLENVIEW State IL ZIP Code 60025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred: MM DD YY Y Y Y Y Secured: Yes No
 12 30 2009 08/01/2012 Interest Rate: 0.0000 % (apr)

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	40000.00
TOTALS This Period (last page in this line only)	▶	90000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

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

Nature of Debt (Purpose):
AIRLINE TRAVEL TICKETS

Mailing Address BOX 6062

City	State	ZIP Code
SIOUX FALLS	SD	57117

Outstanding Balance Beginning This Period

682.40

Transaction ID: SD10.4897

Amount Incurred This Period

0.00

Payment This Period

682.40

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	90000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	90000.00