

# 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  
SCHAKOWSKY FOR CONGRESS

ADDRESS (number and street) P.O. BOX 5130  
 Check if different than previously reported. (ACC)  
EVANSTON IL 60204

2. **FEC IDENTIFICATION NUMBER** C00327023  
**CITY** STATE ZIP CODE STATE DISTRICT  
IS THIS REPORT  NEW (N) OR  AMENDED (A)  
IL 09

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 04 01 2009 through 06 30 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 Melanie R. Cohen

Signature of Treasurer Electronically Filed by Melanie R. Cohen Date 07 15 2009

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

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

SCHAKOWSKY FOR CONGRESS

Report Covering the Period: From:    To:

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)).....  | 373054.00               | 568122.50                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)).....  | 300.00                  | 2300.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 372754.00               | 565822.50                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17).....   | 183340.95               | 357351.58                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 766.15                  | 766.15                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 182574.80               | 356585.43                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 515875.96               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
SCHAKOWSKY FOR CONGRESS

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 4 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   | 189795.00                     | 334645.00                          |
| (i) Itemized (use Schedule A).....  | 97264.00                      | 111982.50                          |
| (ii) Unitemized.....  | 287059.00                     | 446627.50                          |
| (iii) TOTAL of contributions from individuals..... ▶  | 1000.00                       | 1000.00                            |
| (b) Political Party Committees.....   | 84995.00                      | 120495.00                          |
| (c) Other Political Committees (such as PACS).....  | 0.00                          | 0.00                               |
| (d) The Candidate.....  | 373054.00                     | 568122.50                          |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))                |                               |                                    |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....   |                               |                                    |
|   | 0.00                          | 0.00                               |
| 13. LOANS   |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....  | 0.00                          | 0.00                               |
| (b) All Other Loans.....  | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....  | 0.00                          | 0.00                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....                                 |                               |                                    |
|   | 766.15                        | 766.15                             |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.).....   |                               |                                    |
|   | 584.75                        | 3555.67                            |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ |                               |                                    |
|   | 374404.90                     | 572444.32                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES.....  | 183340.95                             | 357351.58                                  |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                         | 0.00                                  | 0.00                                       |
| 19. LOAN REPAYMENTS:   |                                       |  |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                                  | 0.00                                       |
| (b) Of all Other Loans.....  | 0.00                                  | 0.00                                       |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                                  | 0.00                                       |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                                       |  |
| (a) Individuals/Persons Other<br>Than Political Committees.....              | 300.00                                | 2300.00                                    |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                                  | 0.00                                       |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 300.00                                | 2300.00                                    |
| 21. OTHER DISBURSEMENTS.....   | 72495.00                              | 130671.00                                  |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 256135.95                             | 490322.58                                  |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 397607.01 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....                             | 374404.90 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 772011.91 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 256135.95 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 515875.96 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|   |   |
|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 5 / 148<br>(check only one)   |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d<br><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)  
**SCHAKOWSKY FOR CONGRESS**

|   |   |                     |                     |        |
|---|---|---------------------|---------------------|--------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>David Abels<br>Mailing Address 640 North LaSalle, Suite 556<br>City State Zip Code<br><b>Chicago IL 60610</b><br>FEC ID number of contributing federal political committee. <b>C</b> | Date of Receipt<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; border: 1px solid black;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center; border: 1px solid black;">0 6 / 2 6 / 2 0 0 9</td> </tr> </table> <b>Transaction ID: SA11AI.6360</b><br>Amount of Each Receipt this Period<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">300.00</td> </tr> </table> | M M / D D / Y Y Y Y | 0 6 / 2 6 / 2 0 0 9 | 300.00 |
| M M / D D / Y Y Y Y   |   |                     |                     |        |
| 0 6 / 2 6 / 2 0 0 9   |   |                     |                     |        |
| 300.00  |   |                     |                     |        |
| Name of Employer Self-employed<br>Occupation <b>Attorney</b><br>Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                           | Election Cycle-to-Date ▼<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">300.00</td> </tr> </table>   | 300.00              |                     |        |
| 300.00  |   |                     |                     |        |

|   |   |                     |                     |        |
|---|---|---------------------|---------------------|--------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Wendy Abrams<br>Mailing Address 45 Lakewood Place<br>City State Zip Code<br><b>Highland Park IL 60035</b><br>FEC ID number of contributing federal political committee. <b>C</b> | Date of Receipt<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; border: 1px solid black;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center; border: 1px solid black;">0 5 / 2 9 / 2 0 0 9</td> </tr> </table> <b>Transaction ID: SA11AI.7297</b><br>Amount of Each Receipt this Period<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">100.00</td> </tr> </table> | M M / D D / Y Y Y Y | 0 5 / 2 9 / 2 0 0 9 | 100.00 |
| M M / D D / Y Y Y Y   |   |                     |                     |        |
| 0 5 / 2 9 / 2 0 0 9   |   |                     |                     |        |
| 100.00  |   |                     |                     |        |
| Name of Employer Self-employed<br>Occupation <b>Volunteer</b><br>Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                      | Election Cycle-to-Date ▼<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">2400.00</td> </tr> </table>  | 2400.00             |                     |        |
| 2400.00   |   |                     |                     |        |

|   |  |                     |                     |       |
|---|--|---------------------|---------------------|-------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Wendy Abrams<br>Mailing Address 45 Lakewood Place<br>City State Zip Code<br><b>Highland Park IL 60035</b><br>FEC ID number of contributing federal political committee. <b>C</b> | Date of Receipt<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; border: 1px solid black;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center; border: 1px solid black;">0 5 / 2 9 / 2 0 0 9</td> </tr> </table> <b>Transaction ID: SA11AI.7327</b><br>Amount of Each Receipt this Period<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">50.00</td> </tr> </table> | M M / D D / Y Y Y Y | 0 5 / 2 9 / 2 0 0 9 | 50.00 |
| M M / D D / Y Y Y Y   |  |                     |                     |       |
| 0 5 / 2 9 / 2 0 0 9   |  |                     |                     |       |
| 50.00   |  |                     |                     |       |
| Name of Employer Self-employed<br>Occupation <b>Volunteer</b><br>Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                      | Election Cycle-to-Date ▼<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">2450.00</td> </tr> </table>   | 2450.00             |                     |       |
| 2450.00   |  |                     |                     |       |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; border: 1px solid black; padding: 2px;">450.00</td> </tr> </table> | 450.00 |
| 450.00   |   |        |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |   |        |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 148

(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)  
SCHAKOWSKY FOR CONGRESS

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

Mailing Address 1348 West Wellington #1

City Chicago State IL Zip Code 60657

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

Name of Employer Chicago Public Schools Occupation Director of Marketing

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt 06 / 26 / 2009

Transaction ID: SA11AI.6366

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Jill L Allread

Mailing Address 179-3 Linden Avenue

City Oak Park State IL Zip Code 60302

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

Name of Employer PCI Occupation Public Relations

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 05 / 06 / 2009

Transaction ID: SA11AI.6587

Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Anderson

Mailing Address 1618 West Winona Street

City Chicago State IL Zip Code 60640

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

Name of Employer State of Illinois Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 05 / 05 / 2009

Transaction ID: SA11AI.7077

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2100.00

**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 7 / 148  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Lucy Ascoli

Mailing Address 5744 S. Kimbark

City State Zip Code  
Chicago IL 60637

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

Name of Employer Self-employed Occupation  
Fundraising Consultant

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

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2009

Transaction ID: SA11AI.6001

Amount of Each Receipt this Period  
1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Ravi Badlani

Mailing Address 312 Ottawa Lane

City State Zip Code  
Oak Brook IL 60523

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

Name of Employer Self-employed Occupation  
Doctor

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

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

Transaction ID: SA11AI.7046

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lynne Baker

Mailing Address 565 Green Bay Road

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Career Education Corporation Occupation  
Media & Public Policy Director

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

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2009

Transaction ID: SA11AI.7000

Amount of Each Receipt this Period  
900.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2700.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Marcia Balonick

Mailing Address 367 Charal Lane

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Occupation  
Joint Action Committee Executive Director

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6429

Amount of Each Receipt this Period  
250.00

Conduit: JACPAC

**B.** Full Name (Last, First, Middle Initial)  
Frederick N Bates

Mailing Address 622 Briar Place

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  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.5609

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Bauer

Mailing Address 2500 N. Lakeview #2005

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Self-employed Lobbying

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.7048

Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2950.00**

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



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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 9 / 148 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d<br><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)  
**SCHAKOWSKY FOR CONGRESS**

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Michael Bauer        | Date of Receipt<br>MM / DD / YYYY<br>05 / 26 / 2009 |
|   | Mailing Address 2500 N. Lakeview #2005                          | <b>Transaction ID:</b> SA11AI.7049                  |
|   | City State Zip Code<br>Chicago IL 60614                         | Amount of Each Receipt this Period<br>600.00        |
|   | FEC ID number of contributing federal political committee.<br>C |   |
|   | Name of Employer Occupation<br>Self-employed Lobbying           |   |
| Receipt For: 2010<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>3000.00                             |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Carol Been               | Date of Receipt<br>MM / DD / YYYY<br>05 / 19 / 2009 |
|   | Mailing Address 562 Oakdale Ave.                                    | <b>Transaction ID:</b> SA11AI.6633                  |
|   | City State Zip Code<br>Glencoe IL 60022                             | Amount of Each Receipt this Period<br>300.00        |
|   | FEC ID number of contributing federal political committee.<br>C     |   |
|   | Name of Employer Occupation<br>Sonnenschein Nath Rosenthal Attorney |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>300.00                                  |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Deborah Bekken                 | Date of Receipt<br>MM / DD / YYYY<br>05 / 19 / 2009 |
|   | Mailing Address 373 W. Geneva Street                                      | <b>Transaction ID:</b> SA11AI.6631                  |
|   | City State Zip Code<br>Williams Bay WI 53191                              | Amount of Each Receipt this Period<br>250.00        |
|   | FEC ID number of contributing federal political committee.<br>C           |   |
|   | Name of Employer Occupation<br>Field Museum Manager of Sponsored Programs |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>250.00  |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1150.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Diana Beliard

Mailing Address 417 Roslyn Place

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Sudler Realtor

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

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

**Transaction ID:** SA11AI.6516

Amount of Each Receipt this Period  
150.00

300.00

**B.** Full Name (Last, First, Middle Initial)  
Joel Bellows

Mailing Address 209 S. LaSalle Street #800

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Bellows and Bellows Attorney

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

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

**Transaction ID:** SA11AI.7071

Amount of Each Receipt this Period  
300.00

300.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Benton-Powers

Mailing Address 2237 North Magnolia

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Winston and Strawn Attorney

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

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2009

**Transaction ID:** SA11AI.5645

Amount of Each Receipt this Period  
1500.00

1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1950.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 148  
(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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Sandy Bercovitz

Mailing Address 1637 North Dayton

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Sandra R. Bercovitz & Ass-cc. Inc. President

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 9 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6955

Amount of Each Receipt this Period  
450.00

450.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Berghoef

Mailing Address 2501 Kenilworth Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Self-employed Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 9 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.7304

Amount of Each Receipt this Period  
450.00

1450.00

**C.** Full Name (Last, First, Middle Initial)  
Laura Berk

Mailing Address 103 Riss Road

City State Zip Code  
Normal IL 61761

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 |
| 0 | 4 | / | 2 | 7 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6148

Amount of Each Receipt this Period  
375.00

375.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1275.00**

**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 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Laura Berk

Mailing Address 103 Riss Road

City Normal State IL Zip Code 61761

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 ▼ 450.00

Date of Receipt 04 / 27 / 2009  
**Transaction ID:** SA11AI.6149  
 Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Berman

Mailing Address 265 Beach Road

City Glencoe State IL Zip Code 60022

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

Name of Employer New Trier Democrats Occupation Office Manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 04 / 16 / 2009  
**Transaction ID:** SA11AI.5668  
 Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Joan Berman

Mailing Address 265 Beach Road

City Glencoe State IL Zip Code 60022

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

Name of Employer New Trier Democrats Occupation Office Manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 20 / 2009  
**Transaction ID:** SA11AI.5857  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Debra Bernard

Mailing Address 2227 W. Melrose Street

City State Zip Code  
Chicago IL 60618

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

Name of Employer Occupation  
Mayer Brown Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 16 / 2009

**Transaction ID:** SA11AI.5655

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Stella Black

Mailing Address 545 W. Aldine #2A

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Self-employed Real Property Consultant

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 19 / 2009

**Transaction ID:** SA11AI.6619

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Margaret Blackshere

Mailing Address 8150 Monroe

City State Zip Code  
Niles IL 60714

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  
04 / 06 / 2009

**Transaction ID:** SA11AI.5556

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 148  
(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)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Stephen Blandin

Mailing Address 33 North La Salle #2200

City State Zip Code  
Chicago IL 60602

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

Name of Employer Self-employed Occupation  
Self-employed Attorney

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

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

Transaction ID: SA11AI.5900

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Patricia Blessman

Mailing Address 1211 S. Prairie Private #4301

City State Zip Code  
Chicago IL 60605

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

Name of Employer Self-employed Occupation  
Self-employed Psychologist

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

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

Transaction ID: SA11AI.6706

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Karen Boehning

Mailing Address 4300 N. Marine Dr. #705

City State Zip Code  
Chicago IL 60613

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

Name of Employer Self-employed Occupation  
Self-employed Consultant

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

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

Transaction ID: SA11AI.6282

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2800.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Paulita Pike Bokhari

Mailing Address 1100 Forest Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Cannel Gates Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 9 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5575

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date Amount: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Leslie Burns

Mailing Address 1301 North Dearbon, Unit 1505

City State Zip Code  
Chicago IL 60610

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

Name of Employer Self-employed Occupation Futures Trader

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.5931

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date Amount: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Linda Buyer

Mailing Address 3930 N. Pine Grove, #1441

City State Zip Code  
Chicago IL 60613

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

Name of Employer Governors State University Occupation Professor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6831

Amount of Each Receipt this Period  
150.00

Election Cycle-to-Date Amount: 250.00

**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 16 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Muriel Cahn

Mailing Address 521 E. Orange Grove

City State Zip Code  
Burbank CA 91501

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

**Transaction ID:** SA11AI.6083

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Joan Carter

Mailing Address 1234 Ridgewood Lane

City State Zip Code  
Lake Villa IL 60046

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

Name of Employer Employee Attended Association Occupation Occupational VP of Development

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

**Transaction ID:** SA11AI.6957

Amount of Each Receipt this Period  
450.00

**C.** Full Name (Last, First, Middle Initial)  
Bette Cerf Hill

Mailing Address 415 E. NorthWater Street #1505

City State Zip Code  
Chicago IL 60611

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

Name of Employer Women's Charter School Occupation Founder

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  
 0 5 / 0 4 / 2 0 0 9

**Transaction ID:** SA11AI.6445

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Chapman & Cutler  
Mailing Address 111 W. Monroe  
City Chicago State IL Zip Code 60603  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6883  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Curtner  
Mailing Address 111 W. Monroe  
City Chicago State IL Zip Code 60603  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Chapman & Cutler Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6883.0  
Amount of Each Receipt this Period 1500.00  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Myron Cherry  
Mailing Address 30 N. LaSalle St. Suite 2300  
City Chicago State IL Zip Code 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2400.00  
Date of Receipt 04 / 21 / 2009  
Transaction ID: SA11AI.5898  
Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3900.00  
**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 18 / 148                |
|   | <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)  
**SCHAKOWSKY FOR CONGRESS**

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Debbie Clark  | Date of Receipt<br>MM / DD / YYYY<br>05 / 21 / 2009 |
|           | Mailing Address 233 S. Wacker Drive #7800  | <b>Transaction ID:</b> SA11AI.6774                  |
|           | City State Zip Code<br>Chicago IL 60606  | Amount of Each Receipt this Period<br>300.00        |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer: Sonnenschein Nath Rosenthal<br>Occupation: Attorney<br>Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>300.00 |   |

|           |  |   |
|-----------|--|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Fay Clayton   | Date of Receipt<br>MM / DD / YYYY<br>04 / 19 / 2009 |
|           | Mailing Address 1044 Lake Shore Blvd.  | <b>Transaction ID:</b> SA11AI.5771                  |
|           | City State Zip Code<br>Evanston IL 60202   | Amount of Each Receipt this Period<br>300.00        |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer: Robinson Curley & Clayton<br>Occupation: Attorney<br>Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>300.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Fay Clayton   | Date of Receipt<br>MM / DD / YYYY<br>04 / 26 / 2009 |
|           | Mailing Address 1044 Lake Shore Blvd.  | <b>Transaction ID:</b> SA11AI.6209                  |
|           | City State Zip Code<br>Evanston IL 60202   | Amount of Each Receipt this Period<br>150.00        |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   |   |
|           | Name of Employer: Robinson Curley & Clayton<br>Occupation: Attorney<br>Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>450.00 |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Robert Clifford

Mailing Address 1660 Balmoral Circle

City Inverness State IL Zip Code 60067

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 04 / 21 / 2009  
**Transaction ID: SA11AI.5888**  
 Amount of Each Receipt this Period: 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Benita K. Cohen

Mailing Address 9150 Kedvale

City Skokie State IL Zip Code 60076

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

Name of Employer Self-employed Occupation Volunteer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 05 / 25 / 2009  
**Transaction ID: SA11AI.6922**  
 Amount of Each Receipt this Period: 150.00

**C.** Full Name (Last, First, Middle Initial)  
Melanie Rovner Cohen

Mailing Address 167 Park Avenue

City Glencoe State IL Zip Code 60022

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 ▼ 350.00

Date of Receipt: 04 / 20 / 2009  
**Transaction ID: SA11AI.5846**  
 Amount of Each Receipt this Period: 350.00

**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 20 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Melanie Rovner Cohen

Mailing Address 167 Park Avenue

City State Zip Code  
Glencoe IL 60022

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  
0 4 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.6237

Amount of Each Receipt this Period  
175.00

525.00

**B.** Full Name (Last, First, Middle Initial)  
Ann Cole

Mailing Address 125 Mary Street

City State Zip Code  
Winnetka IL 60095

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

Name of Employer Self-employed Occupation Communications Consulting

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

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

Transaction ID: SA11AI.6983

Amount of Each Receipt this Period  
150.00

300.00

**C.** Full Name (Last, First, Middle Initial)  
Howard Conant

Mailing Address 445 North Wells Street

City State Zip Code  
Chicago IL 60610

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

Name of Employer Urban Innovations Occupation Architect

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.5567

Amount of Each Receipt this Period  
2400.00

2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2725.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Josephine Conlon  
Mailing Address 1026 S. Knight Avenue  
City State Zip Code  
Park Ridge IL 60068  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Charitable Volunteer  
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  
0 4 / 2 9 / 2 0 0 9  
Transaction ID: SA11AI.6288  
Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
R. Sue Connolly  
Mailing Address 1618 W. Rosehill Drive  
City State Zip Code  
Chicago IL 60660  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northern Trust Bank Occupation Senior Vice President  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1750.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 9  
Transaction ID: SA11AI.7203  
Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin Conway  
Mailing Address 120 N. LaSalle St., 30th Fl.  
City State Zip Code  
Chicago IL 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cooney & Conway Occupation Attorney  
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  
0 4 / 2 1 / 2 0 0 9  
Transaction ID: SA11AI.5894  
Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5400.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 22 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Jr. Philip H. Corboy

Mailing Address 26 Woodle Road

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Corboy & Demetrio      Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 2 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6881

Amount of Each Receipt this Period  
2400.00

Election Cycle-to-Date ▼ 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Diana Shulla Cose

Mailing Address 601 South LaSalle Street #700

City State Zip Code  
Chicago IL 60605

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

Name of Employer Perspectives Charter School      Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 2 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6172

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date ▼ 300.00

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

Mailing Address 8 Bedford Court

City State Zip Code  
Lincolnshire IL 60069

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

Name of Employer Information Requested      Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6669

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date ▼ 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 23 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Judith Craver  
Mailing Address 9 Brigham Road  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Clinical Psychologist  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2400.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6889  
Amount of Each Receipt this Period 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Crown  
Mailing Address 5 Polo Club Drive  
City Denver State CO Zip Code 80209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Psychotherapist  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2400.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6887  
Amount of Each Receipt this Period 2400.00

**C.** Full Name (Last, First, Middle Initial)  
Lynn Cutler  
Mailing Address 131 S. Dearborn Street  
City Chicago State IL Zip Code 60603  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Holland and Knight Occupation Senior Policy Advisor  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 05 / 25 / 2009  
Transaction ID: SA11AI.6976  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Selma D'Souza

Mailing Address 184 Grove Avenue

City State Zip Code  
Des Plaines IL 60016

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

Name of Employer Self-employed Occupation Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6843

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Anne Megan Davis

Mailing Address 838 W. Belden

City State Zip Code  
Chicago IL 60614

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

Name of Employer Johnson Jones Snelling Gilbert Occupation Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 4 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6644

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Beth Boosalis Davis

Mailing Address 1119 Michigan Avenue

City State Zip Code  
Evanston IL 60202

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

Name of Employer Self-employed Occupation Writer

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 7 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6224

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Cameron Davis

Mailing Address 114 Kedzie Street

City State Zip Code  
Evanston IL 60202

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Alliance for the Great Lakes Executive Director

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6378

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Constance Dickinson

Mailing Address 205 West Wacker Drive, Suite 1800

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Dickinson Group President

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.5558

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Constance Dickinson

Mailing Address 205 West Wacker Drive, Suite 1800

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Dickinson Group President

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.5598

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 850.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Paula DiPerna

Mailing Address P. O. Box 467

City State Zip Code  
Cooperstown NY 13326

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

Name of Employer Chicago Climate Exchange Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

**Transaction ID:** SA11AI.7288

Amount of Each Receipt this Period  
450.00

**B.** Full Name (Last, First, Middle Initial)  
Ellen Domp

Mailing Address 53 W. Jackson Blvd., Suite 1544

City State Zip Code  
Chicago IL 60604

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

Name of Employer Self-employed Occupation Attorney

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  
 0 5 / 0 4 / 2 0 0 9

**Transaction ID:** SA11AI.6646

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 1500 Sheridan Road Apt. 3E

City State Zip Code  
Wilmette IL 60091

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 ▼ 400.00

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

**Transaction ID:** SA11AI.5601

Amount of Each Receipt this Period  
300.00

**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 27 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Joan Eagle

Mailing Address 1030 N State Street #49H

City State Zip Code  
Chicago IL 60610

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

Name of Employer Occupation  
Klein Dub Hölleb Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 19 / 2009

**Transaction ID:** SA11AI.5783

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Jana Edge

Mailing Address 1114 Sheridan

City State Zip Code  
Normal IL 61761

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  
04 / 27 / 2009

**Transaction ID:** SA11AI.6146

Amount of Each Receipt this Period  
450.00

**C.** Full Name (Last, First, Middle Initial)  
Marlena Egan

Mailing Address 28 East Division

City State Zip Code  
Chicago IL 60610

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

Name of Employer Occupation  
Marilyn Migli Chief Operating Officer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 16 / 2009

**Transaction ID:** SA11AI.5737

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Antonia Elipas  
Mailing Address 136 De Windt Road  
City Winnetka State IL Zip Code 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Coldwell Banker Occupation Realtor  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
Date of Receipt: 04 / 29 / 2009  
Transaction ID: SA11AI.6230  
Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Esser  
Mailing Address 811 West Junior Terrace  
City Chicago State IL Zip Code 60613  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Government Finance Office-Occupation Executive Director  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
Date of Receipt: 05 / 05 / 2009  
Transaction ID: SA11AI.7081  
Amount of Each Receipt this Period: 750.00

**C.** Full Name (Last, First, Middle Initial)  
Abigail Fassnacht  
Mailing Address 451 Beverly Pl.  
City Lake Forest State FL Zip Code 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 ▼  
Date of Receipt: 05 / 05 / 2009  
Transaction ID: SA11AI.6718  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 29 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Denise Fedewa  
Mailing Address 2137 West LeMoynes  
City Chicago State IL Zip Code 60622  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Leo Burnett Occupation Advertising  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify)   
300.00  
Date of Receipt 04 / 19 / 2009  
Transaction ID: SA11AI.5761  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Judith Feiertag  
Mailing Address 2244 North Seminary  
City Chicago State IL Zip Code 60614  
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)   
300.00  
Date of Receipt 04 / 24 / 2009  
Transaction ID: SA11AI.5977  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Sunny Fischer  
Mailing Address 1114 Mulford Street  
City Evanston State IL Zip Code 60202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Richard H. Driehaus Foundation Occupation Executive  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify)   
450.00  
Date of Receipt 04 / 26 / 2009  
Transaction ID: SA11AI.6108  
Amount of Each Receipt this Period 450.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Joan Flanagan

Mailing Address 644 W. Arlington Place, Suite 5G

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Center for New Community Fundraiser

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

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: SA11AI.6337

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
Elaine Fox

Mailing Address 4452 W. Devon Ave

City State Zip Code  
Lincolnwood IL 60646

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

Name of Employer Occupation  
Seyfarth Shaw Attorney

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

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

Transaction ID: SA11AI.6924

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Miriam Frankel

Mailing Address 1040 N. Lake Shore Drive, #18C

City State Zip Code  
Chicago IL 60611

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  
MM / DD / YYYY  
05 / 22 / 2009

Transaction ID: SA11AI.6879

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1525.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Dalia Fridi

Mailing Address 1766 West Thorndale

City State Zip Code  
Chicago IL 60657

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

Name of Employer Northwest Memorial Health-care      Occupation Doctor

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.7005

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date Amount: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Dalia Fridi

Mailing Address 1766 West Thorndale

City State Zip Code  
Chicago IL 60657

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

Name of Employer Northwest Memorial Health-care      Occupation Doctor

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

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

Transaction ID: SA11AI.6967

Amount of Each Receipt this Period  
150.00

Election Cycle-to-Date Amount: 450.00

**C.** Full Name (Last, First, Middle Initial)  
Maya Friedler

Mailing Address 20 E. Cedar

City State Zip Code  
Chicago IL 60611

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

Name of Employer Self-employed      Occupation Actor-Producer

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

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

Transaction ID: SA11AI.6184

Amount of Each Receipt this Period  
1500.00

Election Cycle-to-Date Amount: 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1950.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Linda Friedman

Mailing Address 321 S. Plymouth Court

City State Zip Code  
Chicago IL 60604

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

Name of Employer Occupation  
Stowell & Friedman Attorney

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  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** SA11AI.7336

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Linda Friedman

Mailing Address 321 S. Plymouth Court

City State Zip Code  
Chicago IL 60604

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

Name of Employer Occupation  
Stowell & Friedman Attorney

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  
0 5 / 0 5 / 2 0 0 9

**Transaction ID:** SA11AI.7128

Amount of Each Receipt this Period  
900.00

**C.** Full Name (Last, First, Middle Initial)  
Linda Friedman

Mailing Address 321 S. Plymouth Court

City State Zip Code  
Chicago IL 60604

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

Name of Employer Occupation  
Stowell & Friedman Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

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

**Transaction ID:** SA11AI.7337

Amount of Each Receipt this Period  
600.00

**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 33 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Karen Fujisawa  
Mailing Address 635 Rosewood  
City State Zip Code  
Winnetka IL 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Housewife  
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  
0 5 / 0 5 / 2 0 0 9  
Transaction ID: SA11AI.7124  
Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Karen Fujisawa  
Mailing Address 635 Rosewood  
City State Zip Code  
Winnetka IL 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Housewife  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 9  
Transaction ID: SA11AI.6399  
Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Gallagher  
Mailing Address 2421 W. Ardmore Avenue #2  
City State Zip Code  
Chicago IL 60659  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Chicago Fed of Labor Workers Occupation Executive Director WAC  
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  
0 4 / 2 9 / 2 0 0 9  
Transaction ID: SA11AI.6271  
Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 900.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Judith Gaynor

Mailing Address 179 E. Lake Shore Drive #17W

City State Zip Code  
Chicago IL 60611

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 ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 6 / 2 0 0 9

**Transaction ID:** SA11AI.5554

Amount of Each Receipt this Period  
1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Gaynor

Mailing Address 645 Forest Avenue

City State Zip Code  
Evanston IL 60202

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

Name of Employer State of Illinois Occupation Lawyer

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  
 0 4 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.6257

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia Giacchetti

Mailing Address 1829 N. Howe

City State Zip Code  
Chicago IL 60614

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

Name of Employer Self-employed Occupation Attorney

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  
 0 4 / 2 2 / 2 0 0 9

**Transaction ID:** SA11AI.6186

Amount of Each Receipt this Period  
1500.00

**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 35 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Anna Giannoulas  
Mailing Address 6007 North Sheridan Road  
City Chicago State IL Zip Code 60660  
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) ▼ 1500.00  
Date of Receipt 05 / 15 / 2009  
Transaction ID: SA11AI.6973  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Toni Gilpin  
Mailing Address 2414 Pioneer Road  
City Evanston State IL Zip Code 60201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DPOE Occupation Executive Director  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 225.00  
Date of Receipt 05 / 04 / 2009  
Transaction ID: SA11AI.6652  
Amount of Each Receipt this Period 225.00

**C.** Full Name (Last, First, Middle Initial)  
Stanford Glass  
Mailing Address 200 E. Delaware PI - Unit 32-D  
City Chicago State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 300.00  
Date of Receipt 05 / 28 / 2009  
Transaction ID: SA11AI.7211  
Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2025.00  
**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 / 148

(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)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Stanford Glass

Mailing Address 200 E. Delaware PI - Unit 32-D

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60611    |

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

|                                   |                        |
|-----------------------------------|------------------------|
| Name of Employer<br>Self-employed | Occupation<br>Attorney |
|-----------------------------------|------------------------|

|   |                                    |
|---|------------------------------------|
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>350.00 |
|---|------------------------------------|

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.7232

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
Stephanie Glover

Mailing Address 2548 West Bloomingdale Ave.

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60647    |

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

|   |                        |
|---|------------------------|
| Name of Employer<br>Sonnenschein Nath Rosenthal | Occupation<br>Attorney |
|---|------------------------|

|   |                                    |
|---|------------------------------------|
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>300.00 |
|---|------------------------------------|

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.6772

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Robyn Golden

Mailing Address 6233 N. Wayne

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60660    |

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

|   |                             |
|---|-----------------------------|
| Name of Employer<br>Rush Medical Center | Occupation<br>Social Worker |
|---|-----------------------------|

|   |                                    |
|---|------------------------------------|
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>450.00 |
|---|------------------------------------|

Date of Receipt

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

Transaction ID: SA11AI.5943

Amount of Each Receipt this Period

450.00

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

800.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Carol Gonsky  
Mailing Address 2642 N. Lakewood  
City Chicago State IL Zip Code 60614  
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) ▼ 300.00  
Date of Receipt 04 / 27 / 2009  
Transaction ID: SA11AI.6214  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Leonard Goodman  
Mailing Address 1938 N. Sedgwick  
City Chicago State IL Zip Code 60614  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6891  
Amount of Each Receipt this Period 2400.00

**C.** Full Name (Last, First, Middle Initial)  
Howard Gottlieb  
Mailing Address 101 N. Wacker Drive, Box CM 201  
City Chicago State IL Zip Code 60601  
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) ▼ 2000.00  
Date of Receipt 05 / 22 / 2009  
Transaction ID: SA11AI.6877  
Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 148  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth L. Gracie

Mailing Address 303 N. Linden Avenue

City State Zip Code  
Oak Park IL 60302

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

Name of Employer Occupation  
O'Keefe Lyons Hynes Attorney

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  
0 5 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.6827

Amount of Each Receipt this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth L. Gracie

Mailing Address 303 N. Linden Avenue

City State Zip Code  
Oak Park IL 60302

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

Name of Employer Occupation  
O'Keefe Lyons Hynes Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.6828

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)  
E. Lynn Grayson

Mailing Address 2224 Shiloh

City State Zip Code  
Long Grove IL 60047

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

Name of Employer Occupation  
Jenner and Block Attorney

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  
0 4 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.7344

Amount of Each Receipt this Period

150.00

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

3150.00

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Carolyn Grisko  
Mailing Address 400 W. Erie #400  
City Chicago State IL Zip Code 60610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Public Affairs Consultant  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1500.00  
Date of Receipt 05 / 04 / 2009  
Transaction ID: SA11AI.6650  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Frances Grossman  
Mailing Address 5529 S. Kimbark  
City Chicago State IL Zip Code 60637  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bank of America Occupation Banker  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 300.00  
Date of Receipt 04 / 06 / 2009  
Transaction ID: SA11AI.5565  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Joan Gunzberg  
Mailing Address 1021 Lee Street  
City Evanston State IL Zip Code 60202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Arts Business Council of Illinois Occupation Executive Director  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 300.00  
Date of Receipt 05 / 04 / 2009  
Transaction ID: SA11AI.7188  
Amount of Each Receipt this Period 150.00

**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 40 / 148

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)

Jane Raley Haile

Mailing Address 338 Woodland Road

City State Zip Code  
Highland Park IL 60035

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

Name of Employer  
Center on Wrongful Convictions

Occupation  
Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.6039

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Hartigan

Mailing Address 1325 N. State Parkway #22B

City State Zip Code  
Chicago IL 60610

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

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.7093

Amount of Each Receipt this Period

450.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Hassan

Mailing Address 333 West Wacker Drive

City State Zip Code  
Chicago IL 60606

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

Name of Employer  
Skadden Arps

Occupation  
Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.6457

Amount of Each Receipt this Period

750.00

**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  
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FOR LINE NUMBER: PAGE 41 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Keith Hebeisen

Mailing Address 2828 Woodmere Ct

City State Zip Code  
Northbrook IL 60062

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

Name of Employer Occupation  
Clifford Law Offices Attorney

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  
0 4 / 2 1 / 2 0 0 9

**Transaction ID:** SA11AI.5890

Amount of Each Receipt this Period  
2400.00

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

Mailing Address 421 West Melrose #17C

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Self-employed Buinessman

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  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** SA11AI.6323

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Christie Hefner

Mailing Address 2800 N. Lake Shore Drive, #4101

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
CAH LLC CEO

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  
0 4 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.5665

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3700.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 148

(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)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Midge Heurich

Mailing Address 1381 Lake Road

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) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.6849

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Hoffman

Mailing Address 5510 North Sheridan #10A

City State Zip Code  
Chicago IL 60640

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

Name of Employer Occupation  
State of Illinois Fiscal Officer

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.6949

Amount of Each Receipt this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)  
Natasha Holbert

Mailing Address 555 N. Sheridan Road Box 793,

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Occupation  
Information Requested

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.6666

Amount of Each Receipt this Period

300.00

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

1350.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Paula Holderman

Mailing Address 915 Country Club Drive

City State Zip Code  
LaGrange IL 60525

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

Name of Employer Occupation  
Cook County State Attorney Director Continuing Education  
Ofc

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 9 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6241

Amount of Each Receipt this Period  
750.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Robert Howard

Mailing Address 122 S. Michigan Avenue #1850

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Futterman & Howard Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5550

Amount of Each Receipt this Period  
600.00

600.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Howard

Mailing Address 122 S. Michigan Avenue #1850

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Futterman & Howard Attorney

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

Date of Receipt  

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

Transaction ID: SA11AI.5800

Amount of Each Receipt this Period  
150.00

750.00

**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 44 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Robert Howard

Mailing Address 122 S. Michigan Avenue #1850

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Futterman & Howard Attorney

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

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

**Transaction ID:** SA11AI.7145

Amount of Each Receipt this Period  
150.00

900.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Ann Hynes

Mailing Address 7104 W. Birchwood Avenue

City State Zip Code  
Niles IL 60714

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

Name of Employer Occupation  
Corn Products International Attorney

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

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2009

**Transaction ID:** SA11AI.5773

Amount of Each Receipt this Period  
1650.00

1650.00

**C.** Full Name (Last, First, Middle Initial)  
Julie Ann Johnson

Mailing Address 28W351 Geneva Road

City State Zip Code  
West Chicago IL 60185

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

Name of Employer Occupation  
American Slide Chart Corp. CEO

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

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** SA11AI.6310

Amount of Each Receipt this Period  
2400.00

2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4200.00**

**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 45 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Julie Ann Johnson

Mailing Address 28W351 Geneva Road

City State Zip Code  
West Chicago IL 60185

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

Name of Employer American Slide Chart Corp. Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

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

Transaction ID: SA11AI.6311

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Joint Action Committee for Political Affairs (JACPAC)

Mailing Address PO BOX 105

City State Zip Code  
HIGHLAND PARK IL 60035

FEC ID number of contributing federal political committee. **C** C00139659

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  
0 6 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.7342

Amount of Each Receipt this Period  
1950.00

Total Received Through Co-nduit This Period  
**[MEMO ITEM]**

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

Mailing Address P.O. Box 33106

City State Zip Code  
Washington DC 20033

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1145.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.7341

Amount of Each Receipt this Period  
1885.00

Total Received Through Co-nduit This Period  
**[MEMO ITEM]**

**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 46 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Penny Nathan Kahan

Mailing Address 507 W. Grant Place

City State Zip Code  
Chicago IL 60614

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

Name of Employer Self-employed Occupation Attorney

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  
0 5 / 2 5 / 2 0 0 9

**Transaction ID:** SA11AI.6990

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
Ann Kalayil

Mailing Address 6109 N. Hamilton

City State Zip Code  
Chicago IL 60659

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

Name of Employer University of Chicago Occupation Telecommunications

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  
0 4 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.6308

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas Keefe

Mailing Address 6 Timber Water Court

City State Zip Code  
Belleville IL 62226

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

Name of Employer Self-employed Occupation Attorney

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  
0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11AI.6885

Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3450.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Miriam Kelm

Mailing Address 1251 St. John's Avenue

City State Zip Code  
Highland Park IL 60035

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  
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.6220

Amount of Each Receipt this Period  
300.00

300.00

**B.** Full Name (Last, First, Middle Initial)  
Jackie Kendall

Mailing Address 1353 Coneflower

City State Zip Code  
Grayslake IL 60030

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

Name of Employer Occupation  
Midwest Academy Executive Director

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

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

Transaction ID: SA11AI.6917

Amount of Each Receipt this Period  
2120.00

2120.00

**C.** Full Name (Last, First, Middle Initial)  
Andi Kenney

Mailing Address 330 N. Wabash Avenue

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Jenner & Block Attorney

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

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

Transaction ID: SA11AI.6459

Amount of Each Receipt this Period  
450.00

450.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2870.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Theresa Kern</p> <p>Mailing Address 6508 W. 126th Pl.</p> <p>City State Zip Code<br/><b>Palos Heights IL 60463</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>MA Steel Erectors</p> <p>Occupation<br/>President</p> <p>Receipt For: 2010<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">05 / 26 / 2009</span></p> <p><b>Transaction ID: SA11AI.7111</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> |
|---|---|

|   |   |
|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Hazel King</p> <p>Mailing Address 8843 South Oglesby</p> <p>City State Zip Code<br/><b>Chicago IL 60617</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>Self-employed</p> <p>Occupation<br/>Attorney</p> <p>Receipt For: 2010<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">05 / 06 / 2009</span></p> <p><b>Transaction ID: SA11AI.6583</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> |
|---|---|

|   |   |
|---|---|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Barbara Kohl-Spiro</p> <p>Mailing Address 777 N. Prospect Avenue</p> <p>City State Zip Code<br/><b>Milwaukee WI 53202</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer<br/>Self-employed</p> <p>Occupation<br/>Artist</p> <p>Receipt For: 2010<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">06 / 01 / 2009</span></p> <p><b>Transaction ID: SA11AI.6392</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">1500.00</span></p> <p>Conduit: JSTREET PAC</p> |
|---|---|

|  |   |
|--|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">4500.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>       |



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

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

FOR LINE NUMBER: PAGE 49 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Nancy Kohn

Mailing Address 545 West Aldine #6A

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Self-employed Fundraiser

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

Date of Receipt  

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

**Transaction ID:** SA11AI.5910

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Clint Krislov

Mailing Address 1532 Elmwood Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Krislov and Associates Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6228

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Clint Krislov

Mailing Address 1532 Elmwood Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Krislov and Associates Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 5 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6964

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2700.00**

**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 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Clint Krislov

Mailing Address 1532 Elmwood Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Krislov and Associates Attorney

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

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

Transaction ID: SA11AI.6965

Amount of Each Receipt this Period  
1600.00

4000.00

**B.**

Full Name (Last, First, Middle Initial)  
Ruth Krugly

Mailing Address 922 Pontiac Road

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
Schiff Hardin Attorney

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

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

Transaction ID: SA11AI.6998

Amount of Each Receipt this Period  
250.00

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Emher La Chappelle

Mailing Address 1618 Central Avenue

City State Zip Code  
Wilmette IL 60091

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  
0 4 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.5838

Amount of Each Receipt this Period  
300.00

300.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Deborah Lahey

Mailing Address 1500 W. Sunnyside

City State Zip Code  
Chicago IL 60640

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

Name of Employer Information Requested Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: SA11AI.5571

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Katherine K Laing

Mailing Address 233 East 13th Street #1307

City State Zip Code  
Chicago IL 60605

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

Name of Employer Environmental Law & Policy Ctr Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt

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

Transaction ID: SA11AI.5945

Amount of Each Receipt this Period

225.00

**C.**

Full Name (Last, First, Middle Initial)  
Lakshmi Lakshmanan

Mailing Address 1133 Ashland Road, #604

City State Zip Code  
Columbia MO 65201

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt

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

Transaction ID: SA11AI.5927

Amount of Each Receipt this Period

225.00

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Jerry Latherow  
Mailing Address 1852 N. Burling Street  
City Chicago State IL Zip Code 60602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Latherow & Porretta Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 04 / 22 / 2009  
Transaction ID: SA11AI.6247  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Zafra Margolin Lerman  
Mailing Address 1911 Grant  
City Evanston State IL Zip Code 60201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia College Chicago Occupation Professor  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1600.00  
Date of Receipt 04 / 16 / 2009  
Transaction ID: SA11AI.5687  
Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Fay Hartog Levin  
Mailing Address 240 Locust Road  
City Winnetka State IL Zip Code 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Res Publica Group Occupation Senior Consultant  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2400.00  
Date of Receipt 05 / 29 / 2009  
Transaction ID: SA11AI.7234  
Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4900.00  
**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 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Fay Hartog Levin  
Mailing Address 240 Locust Road  
City State Zip Code  
Winnetka IL 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Res Publica Group Senior Consultant  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 9  
Transaction ID: SA11AI.7235  
Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Robin Levy  
Mailing Address 630 Bent Creek Ridge  
City State Zip Code  
Deerfield IL 60015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self-employed Attorney  
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  
0 5 / 2 5 / 2 0 0 9  
Transaction ID: SA11AI.6915  
Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Lori Lightfoot  
Mailing Address 3434 W. Wrightwood  
City State Zip Code  
Chicago IL 60647  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Mayer Brown Attorney  
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  
0 6 / 3 0 / 2 0 0 9  
Transaction ID: SA11AI.6382  
Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1900.00  
**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Astri Lindberg  
Mailing Address 2896 Sheridan Place  
City Evanston State IL Zip Code 60201  
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) ▼ 400.00  
Date of Receipt: 04 / 19 / 2009  
Transaction ID: SA11AI.5792  
Amount of Each Receipt this Period: 150.00

**B.** Full Name (Last, First, Middle Initial)  
Astri Lindberg  
Mailing Address 2896 Sheridan Place  
City Evanston State IL Zip Code 60201  
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) ▼ 900.00  
Date of Receipt: 05 / 28 / 2009  
Transaction ID: SA11AI.7177  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Sharon Lindstrom  
Mailing Address 2020 Lincoln Park W., N. 34-H  
City Chicago State IL Zip Code 60614  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Protiviti Occupation Consultant  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1650.00  
Date of Receipt: 05 / 15 / 2009  
Transaction ID: SA11AI.6974  
Amount of Each Receipt this Period: 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 55 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Rhita Lippitz

Mailing Address 800 Elgin Road, PH21

City State Zip Code  
Evanston IL 60201

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

Name of Employer Self-employed Occupation  
Lawyer

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 2 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6182

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Locke

Mailing Address 7442 N. Hoyne #1W

City State Zip Code  
Chicago IL 60645

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

Name of Employer Cook County Clerk Occupation  
Administrator

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 5 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6539

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Sara Loevy

Mailing Address 1321 East 50th Street

City State Zip Code  
Chicago IL 60615

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

Name of Employer Self-employed Occupation  
Consultant

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 4 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5955

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **675.00**

**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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Christine Long

Mailing Address 400 E. Randolph, Apt. 1430

City State Zip Code  
Chicago IL 60601

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

Name of Employer Occupation  
U.S. Dept. of Labor Consultant

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6601

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Kate Maehr

Mailing Address 328 North Harvey

City State Zip Code  
Oak Park IL 60302

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

Name of Employer Occupation  
Greater Chicago Food Depository Executive Director

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 2 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6251

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1406 Cleveland Street

City State Zip Code  
Evanston IL 60202

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

Name of Employer Occupation  
McTigue Financial Group Financial Representative

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 0 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.5830

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Bonnie McGrath

Mailing Address 221 North LaSalle Suite 2016

City State Zip Code  
Chicago IL 60601

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

Name of Employer Occupation  
Self-employed Attorney

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

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

Transaction ID: SA11AI.6102

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Erin McInerney

Mailing Address 2030 N. Burling Street

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
LaSalle Bank Executive Vice President

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

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

Transaction ID: SA11AI.5947

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Brad McLaughlin

Mailing Address 518 West Surf #1

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
TPAN Director of Development

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

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

Transaction ID: SA11AI.6188

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mike McRaith

Mailing Address 3353 N. Greenview Avenue

City State Zip Code  
Chicago IL 60657

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

Name of Employer State of Illinois Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 3 | 0 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6327

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date ▼ 300.00

**B.** Full Name (Last, First, Middle Initial)  
Jack Melamed

Mailing Address 130 Westview Road

City State Zip Code  
Winnetka IL 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 ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 0 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5844

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date ▼ 300.00

**C.** Full Name (Last, First, Middle Initial)  
Barbara Melcher

Mailing Address 599 Greenleaf Avenue

City State Zip Code  
Glencoe IL 60022

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5701

Amount of Each Receipt this Period  
450.00

Election Cycle-to-Date ▼ 600.00

**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)  
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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Scott Mendeloff

Mailing Address 321 N. Clark Street #3400

City State Zip Code  
Chicago IL 60654

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

Name of Employer Occupation  
Howrey 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  
0 5 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.7237

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
Scott Mendeloff

Mailing Address 321 N. Clark Street #3400

City State Zip Code  
Chicago IL 60654

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

Name of Employer Occupation  
Howrey 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  
0 5 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.7238

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
Gail Meneley

Mailing Address 1787 Old Mill Road

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Occupation  
Shields Meneley Partners Executive Consulting

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.5743

Amount of Each Receipt this Period  
250.00

**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  
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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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Judith Millenson

Mailing Address 9043 Kilbourn

City State Zip Code  
Skokie IL 60076

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 ▼ 225.00

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

**Transaction ID:** SA11AI.6783

Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
Linda P. Miller

Mailing Address 847 W. Will Avenue

City State Zip Code  
Chicago IL 60614

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

Name of Employer Self-employed Occupation Consultant

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  
 0 4 / 2 0 / 2 0 0 9

**Transaction ID:** SA11AI.5856

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Linda P. Miller

Mailing Address 847 W. Will Avenue

City State Zip Code  
Chicago IL 60614

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 7 / 2 0 0 9

**Transaction ID:** SA11AI.7168

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **825.00**

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

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

Mailing Address 3180 N Lake Shore Dr.

City State Zip Code  
Chicago IL 60657

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

Name of Employer Masterpiece Editions Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

**Transaction ID:** SA11AI.6613

Amount of Each Receipt this Period  
500.00

Conduit: JACPAC

**B.**

Full Name (Last, First, Middle Initial)  
Martha Mills

Mailing Address 1021 W. Bryn Mawr

City State Zip Code  
Chicago IL 60660

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
04 / 03 / 2009

**Transaction ID:** SA11AI.5539

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen Monahan

Mailing Address 7622 N. Rogers

City State Zip Code  
Chicago IL 60626

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

Name of Employer Child Health Data Lab Occupation Project Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** SA11AI.6180

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Catherine Moran  
Mailing Address 4713 N. LaPorte  
City Chicago State IL Zip Code 60630  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SAP Occupation Global Software Co.  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 05 / 06 / 2009  
Transaction ID: SA11AI.6683  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Gail H Morse  
Mailing Address 3739 N. Wilton Ave. #2  
City Chicago State IL Zip Code 60613  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Jenner & Block Occupation Attorney  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 06 / 01 / 2009  
Transaction ID: SA11AI.6401  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Morten  
Mailing Address 5210 N. Wayne Ave., #2  
City Chicago State IL Zip Code 60640  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Advocacy & Policy Consulant  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00  
Date of Receipt 05 / 15 / 2009  
Transaction ID: SA11AI.6545  
Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2800.00  
**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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Katherine Nathan

Mailing Address 175 E. Delaware Place

City State Zip Code  
Chicago IL 60611

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

Name of Employer Intransition Occupation Project manager

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  
 0 4 / 2 1 / 2 0 0 9

**Transaction ID:** SA11AI.6162

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Brandon Neese

Mailing Address 1056 W. NW Northshore, #1W

City State Zip Code  
Chicago IL 60626

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

Name of Employer Cook County Clerk's Office Occupation Government Admin.

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  
 0 5 / 0 4 / 2 0 0 9

**Transaction ID:** SA11AI.6443

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Elaine Nekritz

Mailing Address 3 The Court of Island Point

City State Zip Code  
Northbrook IL 60062

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 ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

**Transaction ID:** SA11AI.6331

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 64 / 148                |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| <input type="checkbox"/> 14   | <input type="checkbox"/> 15  |                              |

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

NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

|   |  |                                     |   |
|---|--|-------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Charlotte A. Newberger      |                                     | Date of Receipt<br>MM / DD / YYYY<br>06 / 16 / 2009 |
|   | Mailing Address 3240 Lake Shore Drive #13A                             |                                     | <b>Transaction ID:</b> SA11AI.7310                  |
|   | City<br>Chicago  | State<br>IL                         | Zip Code<br>60657                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                     | Amount of Each Receipt this Period<br>1500.00       |
|   | Name of Employer<br>Rubaloff   | Occupation<br>Real Estate Broker    |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>1500.00 |   |

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Catherine Nowacki           |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 21 / 2009 |
|   | Mailing Address 708 Prospect Avenue                                    |                                    | <b>Transaction ID:</b> SA11AI.6094                  |
|   | City<br>Winnetka   | State<br>IL                        | Zip Code<br>60093                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    | Amount of Each Receipt this Period<br>150.00        |
|   | Name of Employer<br>Self-employed                                      | Occupation<br>Homemaker            |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>300.00 |   |

|   |  |                                    |   |
|---|--|------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Julia Nowicki               |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 29 / 2009 |
|   | Mailing Address 455 W. Oakdale #3                                      |                                    | <b>Transaction ID:</b> SA11AI.6239                  |
|   | City<br>Chicago  | State<br>IL                        | Zip Code<br>60657                                   |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    | Amount of Each Receipt this Period<br>750.00        |
|   | Name of Employer<br>Self-employed                                      | Occupation<br>Attorney             |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>750.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2400.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Catherine O'Malley

Mailing Address 1560 N. Sandburg Terrace #3310

City State Zip Code  
Chicago IL 60610

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

Name of Employer KO Strategies Occupation Executive Director

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 5 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.7126

Amount of Each Receipt this Period  
900.00

900.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Oppenheimer

Mailing Address 1501 North State #11B

City State Zip Code  
Chicago IL 60610

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

Name of Employer Self-employed Occupation Organization Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6526

Amount of Each Receipt this Period  
2400.00

2400.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Oppenheimer

Mailing Address 1501 North State #11B

City State Zip Code  
Chicago IL 60610

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

Name of Employer Self-employed Occupation Organization Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6527

Amount of Each Receipt this Period  
600.00

3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3900.00**

**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 66 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Alyx Pattison

Mailing Address 1111 N. Western #2S

City State Zip Code  
Chicago IL 60622

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

Name of Employer Occupation  
Katten Muchin Attorney

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

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

**Transaction ID:** SA11AI.6384

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Kerry Peck

Mailing Address 105 W. Adams Street, 31st Floor

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Peck Bloom Austriaco & Mitchell Attorney

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

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** SA11AI.7009

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Aurie Pennick

Mailing Address 1480 Potawatomi Road

City State Zip Code  
Grayslake IL 60030

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

Name of Employer Occupation  
Field Museum Lawyer

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

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** SA11AI.6064

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2400.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Ursula Piech

Mailing Address **8331 Parrish Avenue**

City **Highland** State **IN** Zip Code **46322**

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

Name of Employer Not Employed      Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **225.00**

Date of Receipt **05 / 05 / 2009**  
**Transaction ID: SA11AI.7132**  
 Amount of Each Receipt this Period **225.00**

**B.** Full Name (Last, First, Middle Initial)  
Adrienne Pitts

Mailing Address **5036 South Ellis**

City **Chicago** State **IL** Zip Code **60615**

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

Name of Employer **Sidley Austin**      Occupation **Attorney**

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **1500.00**

Date of Receipt **05 / 06 / 2009**  
**Transaction ID: SA11AI.6585**  
 Amount of Each Receipt this Period **1500.00**

**C.** Full Name (Last, First, Middle Initial)  
Anita Ponder

Mailing Address **10 E. Ontario #5006**

City **Chicago** State **IL** Zip Code **60611**

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

Name of Employer **Drinker Biddle Gardner Carton**      Occupation **Attorney**

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **05 / 25 / 2009**  
**Transaction ID: SA11AI.7036**  
 Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2725.00**

**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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Joseph Power

Mailing Address 70 West Madison #5500

City State Zip Code  
Chicago IL 60602

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

Name of Employer Occupation  
Power Rogers & Smith Attorney

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

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

**Transaction ID:** SA11AI.5885

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Power

Mailing Address 344 W. Wellington

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Self-employed Novelist

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

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

**Transaction ID:** SA11AI.5886

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Power

Mailing Address 344 W. Wellington

City State Zip Code  
Chicago IL 60657

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

Name of Employer Occupation  
Self-employed Novelist

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

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

**Transaction ID:** SA11AI.6347

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4800.00**

**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 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Prindable

Mailing Address 120 N. LaSalle Street 31st Floor

City State Zip Code  
Chicago IL 60602

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

Name of Employer Clifford Law Offices 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  
 0 4 / 2 1 / 2 0 0 9

**Transaction ID:** SA11AI.5892

Amount of Each Receipt this Period  
2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Gigi Pucker

Mailing Address 2430 N. Lakeview Avenue

City State Zip Code  
Chicago IL 60614

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

Name of Employer DEE GEE Entertainment Occupation Executive

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  
 0 5 / 0 7 / 2 0 0 9

**Transaction ID:** SA11AI.6746

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Roberta Rakove

Mailing Address 608 Asbury #2

City State Zip Code  
Evanston IL 60202

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

Name of Employer Siani Health Systems Occupation Vice President Govt Affairs

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  
 0 4 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.6315

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5400.00**

**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)  
SCHAKOWSKY FOR CONGRESS

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |         |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Diane Rauner</p> <p>Mailing Address 720 Rosewood Avenue</p> <p>City State Zip Code<br/>Winnetka IL 60093</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation<br/>Ounce of Prevention Executive Director</p> <p>Receipt For: 2010<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">2400.00</p> | <p>Date of Receipt<br/> <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>4</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.5949</p> <p>Amount of Each Receipt this Period<br/> <table border="1" style="width:100%; text-align: right;"> <tr><td>2400.00</td></tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 1 |  | 2 | 0 | 0 | 9 | 2400.00 |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |         |
| 0   | 4   |   | 2 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |         |
| 2400.00   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |         |

|   |  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Diane Rauner</p> <p>Mailing Address 720 Rosewood Avenue</p> <p>City State Zip Code<br/>Winnetka IL 60093</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation<br/>Ounce of Prevention Executive Director</p> <p>Receipt For: 2010<br/> <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">3000.00</p> | <p>Date of Receipt<br/> <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>4</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.6348</p> <p>Amount of Each Receipt this Period<br/> <table border="1" style="width:100%; text-align: right;"> <tr><td>600.00</td></tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 1 |  | 2 | 0 | 0 | 9 | 600.00 |
| M   | M  | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |        |
| 0   | 4  |   | 2 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |        |
| 600.00  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |

|   |  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Andrea Reich</p> <p>Mailing Address 940 Sutton Drive</p> <p>City State Zip Code<br/>Northbrook IL 60062</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation<br/>Evanston Northwestern Registered Nurse</p> <p>Receipt For: 2010<br/> <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">300.00</p> | <p>Date of Receipt<br/> <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.5799</p> <p>Amount of Each Receipt this Period<br/> <table border="1" style="width:100%; text-align: right;"> <tr><td>150.00</td></tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 1 | 9 |  | 2 | 0 | 0 | 9 | 150.00 |
| M   | M  | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |        |
| 0   | 4  |   | 1 | 9 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |        |
| 150.00  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3150.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Laura Ricketts

Mailing Address 1615 W. Rosehill Drive

City State Zip Code  
Chicago IL 60660

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

Name of Employer Ecotravel LLC Occupation Executive

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  
 0 5 / 0 4 / 2 0 0 9

**Transaction ID:** SA11AI.6580

Amount of Each Receipt this Period  
2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Laura Ricketts

Mailing Address 1615 W. Rosehill Drive

City State Zip Code  
Chicago IL 60660

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

Name of Employer Ecotravel LLC Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 9

**Transaction ID:** SA11AI.6642

Amount of Each Receipt this Period  
600.00

**C.**

Full Name (Last, First, Middle Initial)  
Genita Robinson

Mailing Address 801 South Plymouth Court, Unit 101

City State Zip Code  
Chicago IL 60605

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

Name of Employer Self-employed Occupation Consultant

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  
 0 5 / 1 5 / 2 0 0 9

**Transaction ID:** SA11AI.6552

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3150.00**

**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 / 148

(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)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)

Margaret Robling

Mailing Address 1802 West Cortland Street

City State Zip Code  
Chicago IL 60622

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

Name of Employer Occupation  
Self-employed Psychiatrist

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

Date of Receipt

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

Transaction ID: SA11AI.5721

Amount of Each Receipt this Period

|        |
|--------|
| 300.00 |
|--------|

**B.**

Full Name (Last, First, Middle Initial)

Janice E. Rodgers

Mailing Address 2100 N. Lincoln Park #12CN

City State Zip Code  
Chicago IL 60614

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

Name of Employer Occupation  
Quarles and Brady Attorney

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

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 7 |   | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.7329

Amount of Each Receipt this Period

|         |
|---------|
| 1500.00 |
|---------|

**C.**

Full Name (Last, First, Middle Initial)

Larry Rogers

Mailing Address 1355 South Clark St.

City State Zip Code  
Chicago IL 60605

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

Name of Employer Occupation  
Power Rogers & Smith Attorney

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

Date of Receipt

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

Transaction ID: SA11AI.5884

Amount of Each Receipt this Period

|         |
|---------|
| 2400.00 |
|---------|

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

|         |
|---------|
| 4200.00 |
|---------|

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Barbara Rose

Mailing Address 650 W. Grace Street

City State Zip Code  
Chicago IL 60613

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

Name of Employer Occupation  
SN Peck Builders Comptroller

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 3 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.5531

Amount of Each Receipt this Period  
450.00

Election Cycle-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Lauren S. Rosenthal

Mailing Address 1407 W. Hood

City State Zip Code  
Chicago IL 60660

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

Name of Employer Occupation  
Self-employed Lawyer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 4 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6576

Amount of Each Receipt this Period  
300.00

Election Cycle-to-Date ▼ 300.00

**C.** Full Name (Last, First, Middle Initial)  
Amy Rubin

Mailing Address 9227 Ida Lane

City State Zip Code  
Morton Grove IL 60053

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

Name of Employer Occupation  
Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 4 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6489

Amount of Each Receipt this Period  
225.00

Election Cycle-to-Date ▼ 225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **975.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Sally Rudolph

Mailing Address 1918 Owens Drive

City State Zip Code  
Bloomington IL 61701

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 04 / 27 / 2009  
**Transaction ID: SA11AI.6074**  
 Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Kathy Ryg

Mailing Address 307 Onwentsia Road

City State Zip Code  
Vernon Hills IL 60061

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 ▼ 300.00

Date of Receipt 04 / 26 / 2009  
**Transaction ID: SA11AI.6112**  
 Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Alice Young Sabl

Mailing Address 175 E. Delaware Pl., Apt. 7211

City State Zip Code  
Chicago IL 60611

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 05 / 09 / 2009  
**Transaction ID: SA11AI.6869**  
 Amount of Each Receipt this Period 150.00

**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 76 / 148  
(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)  
**SCHAKOWSKY FOR CONGRESS**

**A.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Margie Schaps  |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 19 / 2009 |
| Mailing Address 2404 Harrison Street  |                                    | <b>Transaction ID:</b> SA11AI.5824                  |
| City<br>Evanston  | State<br>IL                        | Zip Code<br>60201                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>300.00        |
| Name of Employer<br>Health & Medicine Policy Research Grou  | Occupation<br>Director             |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>300.00 |   |

**B.**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br>Judith Schindler   |  | Date of Receipt<br>MM / DD / YYYY<br>05 / 27 / 2009 |
| Mailing Address 900 N. Franklin, #200   |  | <b>Transaction ID:</b> SA11AI.7167                  |
| City<br>Chicago   | State<br>IL                            | Zip Code<br>60610                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br>1500.00       |
| Name of Employer<br>Self-employed   | Occupation<br>Communications Executive |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1500.00    |   |

**C.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Andrea Schleifer   |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 19 / 2009 |
| Mailing Address 1842 W. Wabansia  |                                    | <b>Transaction ID:</b> SA11AI.5812                  |
| City<br>Chicago   | State<br>IL                        | Zip Code<br>60622                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>450.00        |
| Name of Employer<br>Self-employed   | Occupation<br>Attorney             |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>450.00 |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |         |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Zaldwaynaka Scott

Mailing Address 6910 S. Euclid Avenue

City State Zip Code  
Chicago IL 60649

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

Name of Employer Occupation  
Mayer Brown Rowe Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 4 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.7185

Amount of Each Receipt this Period  
600.00

600.00

**B.**

Full Name (Last, First, Middle Initial)  
Penny Bender Sebring

Mailing Address 2735 Sheridan Road

City State Zip Code  
Evanston IL 60201

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

Name of Employer Occupation  
University of Chicago Administrator

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 1 | 5 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6530

Amount of Each Receipt this Period  
150.00

2550.00

**C.**

Full Name (Last, First, Middle Initial)  
Alice Segal

Mailing Address 2718 W. Greenleaf

City State Zip Code  
Chicago IL 60645

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

Name of Employer Occupation  
Anxiety Center Administrator

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6027

Amount of Each Receipt this Period  
300.00

300.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Ashish Sen

Mailing Address 2557 W. Farewell Avenue

City State Zip Code  
Chicago IL 60645

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

Name of Employer Occupation  
University of Chicago Professor

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 03 / 2009

Transaction ID: SA11AI.5542

Amount of Each Receipt this Period  
150.00

650.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda Rae Sher

Mailing Address 159 East Walton Place #10E

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Joint Affairs Committee Director of Special Projects

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 29 / 2009

Transaction ID: SA11AI.7296

Amount of Each Receipt this Period  
250.00

Conduit: JACPAC

250.00

**C.**

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

Mailing Address 33 W. Monroe, 17th Floor

City State Zip Code  
Chicago IL 60603

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

Name of Employer Occupation  
Self-employed Consultant

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 28 / 2009

Transaction ID: SA11AI.7223

Amount of Each Receipt this Period  
300.00

300.00

**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 79 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Debra Shore

Mailing Address 9232 Avers Avenue

City State Zip Code  
Evanston IL 60203

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

Name of Employer Chicago Wilderness Magazine  
Occupation Editor

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6522

Amount of Each Receipt this Period  
1500.00

Election Cycle-to-Date ▼ 1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Gabrielle Sigel

Mailing Address 330 N. Wabash Avenue

City State Zip Code  
Chicago IL 60611

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

Name of Employer Jenner & Block  
Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 8 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6857

Amount of Each Receipt this Period  
600.00

Election Cycle-to-Date ▼ 600.00

**C.**

Full Name (Last, First, Middle Initial)  
Christine Singer

Mailing Address 5805 S. Blackstone

City State Zip Code  
Chicago IL 60637

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

Name of Employer University of Chicago  
Occupation Senior Advisor

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6131

Amount of Each Receipt this Period  
75.00

Election Cycle-to-Date ▼ 225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2175.00**

**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 80 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Rebecca A Sive

Mailing Address 1235 N. Astor St #3N

City State Zip Code  
Chicago IL 60610

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

Name of Employer Self-employed Occupation  
Self-employed Consultant

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

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2009

**Transaction ID:** SA11AI.6736

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Judy Smith

Mailing Address 150 Millstone Road

City State Zip Code  
Deerfield IL 60015

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

Name of Employer Self-employed Occupation  
Self-employed Homemaker

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

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2009

**Transaction ID:** SA11AI.6093

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Lisa Snow

Mailing Address 550 West Van Buren

City State Zip Code  
Chicago IL 60607

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

Name of Employer Huron Consulting Group Occupation  
Huron Consulting Group Consultant

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

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2009

**Transaction ID:** SA11AI.6211

Amount of Each Receipt this Period  
450.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Jerold Solovy  
Mailing Address 330 N. Wabash #4400

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Jenner and Block Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 01 / 2009

**Transaction ID:** SA11AI.6394

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
Jerold Solovy  
Mailing Address 330 N. Wabash #4400

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Jenner and Block Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 01 / 2009

**Transaction ID:** SA11AI.6395

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
Marge Sondler  
Mailing Address 2147 W. Farwell

City State Zip Code  
Chicago IL 60645

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

Name of Employer Occupation  
Northwestern Memorial Hospital Manager

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 06 / 2009

**Transaction ID:** SA11AI.6529

Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5400.00**

**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 82 / 148

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Marge Sondler

Mailing Address 2147 W. Farwell

City State Zip Code  
Chicago IL 60645

FEC ID number of contributing federal political committee. C

Name of Employer Northwestern Memorial Hos-  
pital Occupation  
Manager

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

Transaction ID: SA11AI.6581

Amount of Each Receipt this Period  
600.00

**B.**

Full Name (Last, First, Middle Initial)  
Elisa Spain

Mailing Address 1100 Oak Avenue

City State Zip Code  
Evanston IL 60202

FEC ID number of contributing federal political committee. C

Name of Employer Self-employed Occupation  
Coach and Facilitator

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

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

Transaction ID: SA11AI.6473

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Natalie Spears

Mailing Address 1237 W. Foster Ave.

City State Zip Code  
Chicago IL 60640

FEC ID number of contributing federal political committee. C

Name of Employer Sonnenschein Nath Rosent-  
hal Occupation  
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.6752

Amount of Each Receipt this Period  
600.00

**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 83 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Ronna Stamm

Mailing Address 1126 Michigan Ave

City State Zip Code  
Evanston IL 60202

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

Name of Employer Self-employed Occupation Homemaker

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  
 0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6696

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Francy Starr

Mailing Address 2018 Caminito San Nicholas

City State Zip Code  
La Jolla CA 92037

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  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6437

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Julia Stasch

Mailing Address 140 S. Dearborn 11th Fl.

City State Zip Code  
Chicago IL 60603

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

Name of Employer MacArthur Foundation Occupation Vice President

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  
 0 5 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.6992

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1900.00**

**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 84 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Heather Steans  
 Mailing Address 5348 N. Lakewood Ave.  
 City Chicago State IL Zip Code 60640  
 Date of Receipt 06 / 16 / 2009  
**Transaction ID:** SA11AI.7312  
 Amount of Each Receipt this Period 1500.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self-employed Occupation Homemaker  
 Receipt For: 2010 Election Cycle-to-Date 1500.00  
 Primary    General  
 Other (specify) ▼

**B.** Full Name (Last, First, Middle Initial)  
Mary Stowell  
 Mailing Address 301 Woodley Road  
 City Winnetka State IL Zip Code 60693  
 Date of Receipt 05 / 25 / 2009  
**Transaction ID:** SA11AI.7034  
 Amount of Each Receipt this Period 450.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Stowell & Freidman Occupation Attorney  
 Receipt For: 2010 Election Cycle-to-Date 450.00  
 Primary    General  
 Other (specify) ▼

**C.** Full Name (Last, First, Middle Initial)  
Mary Stowell  
 Mailing Address 301 Woodley Road  
 City Winnetka State IL Zip Code 60693  
 Date of Receipt 06 / 08 / 2009  
**Transaction ID:** SA11AI.6427  
 Amount of Each Receipt this Period 300.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Stowell & Freidman Occupation Attorney  
 Receipt For: 2010 Election Cycle-to-Date 750.00  
 Primary    General  
 Other (specify) ▼

**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 85 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Larry Suffredin

Mailing Address 2431 Pioneer

City State Zip Code  
Evanston IL 60201

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

Name of Employer Self-employed Occupation Attorney

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 5 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6996

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Kathryn Sullivan

Mailing Address 221 N Lombard

City State Zip Code  
Oak Park IL 60302

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

Name of Employer ACLU Occupation Development Director

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

Date of Receipt  

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

**Transaction ID:** SA11AI.5728

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Jo Anne Sylvester

Mailing Address 1508 W. Estes

City State Zip Code  
Chicago IL 60626

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

Name of Employer Infant Welfare Society Occupation Health Care Administration

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

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 7 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11AI.6157

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

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

Mailing Address 5210 North Wayne #2

City State Zip Code  
Chicago IL 60640

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

Name of Employer Occupation  
Goodman Theater Director of Communications

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 5 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.7069

Amount of Each Receipt this Period  
300.00

300.00

**B.** Full Name (Last, First, Middle Initial)  
Aylice Toohey

Mailing Address 1128 West George

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  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 5 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.6455

Amount of Each Receipt this Period  
750.00

750.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas Vandenberg

Mailing Address 2754 Summit

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Occupation  
Uhlich Children's Advantage Network CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 9 | / | 2 | 0 | 0 | 9 |

Transaction ID: SA11AI.7286

Amount of Each Receipt this Period  
375.00

375.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1425.00**

**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 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCHAKOWSKY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Eunice Ward

Mailing Address 411 W. Ontario St., Apt. 519

City State Zip Code  
Chicago IL 60610

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Nottage and Ward Attorney

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

Date of Receipt MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** SA11AI.6300

Amount of Each Receipt this Period  
450.00

**B.** Full Name (Last, First, Middle Initial)  
Candace Wayne

Mailing Address 221 North LaSalle St. #1938

City State Zip Code  
Chicago IL 60601

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Wayne and Jemilo Attorney

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

Date of Receipt MM / DD / YYYY  
04 / 26 / 2009

**Transaction ID:** SA11AI.6126

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Jill Weinberg

Mailing Address 243 Linden Park Place

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
US Holocaust Memorial Museum Fundraiser

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

Date of Receipt MM / DD / YYYY  
04 / 19 / 2009

**Transaction ID:** SA11AI.5765

Amount of Each Receipt this Period  
225.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2175.00

**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 88 / 148

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)

Bernard Weissbourd

Mailing Address 1800 Sherman

City State Zip Code  
Evanston IL 60201

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) ▼ 1350.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 01 / 2009

Transaction ID: SA11AI.6403

Amount of Each Receipt this Period

1350.00

**B.**

Full Name (Last, First, Middle Initial)

Anna Wermuth

Mailing Address 123 N. Wacker Dr., Suite 1800

City State Zip Code  
Chicago IL 60606

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

Name of Employer Occupation  
Meckler Bulger Tilson Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 22 / 2009

Transaction ID: SA11AI.6893

Amount of Each Receipt this Period

450.00

**C.**

Full Name (Last, First, Middle Initial)

Tracy Whitehead

Mailing Address 305 West Fullerton Parkway

City State Zip Code  
Chicago IL 60614

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) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 04 / 2009

Transaction ID: SA11AI.6648

Amount of Each Receipt this Period

225.00

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

2025.00

**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 89 / 148  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Bonnie Wilson

Mailing Address 530 Hinman #5C

City State Zip Code  
Evanston IL 60202

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

Name of Employer Occupation  
Koenig & Strey Real Estate Agent

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

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

**Transaction ID:** SA11AI.7121

Amount of Each Receipt this Period  
150.00

300.00

**B.** Full Name (Last, First, Middle Initial)  
Leha Yarrow

Mailing Address 6631 Trumbull

City State Zip Code  
Lincolnwood IL 60712

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

Name of Employer Occupation  
Publications International Editor

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

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** SA11AI.6276

Amount of Each Receipt this Period  
150.00

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mark Zivin

Mailing Address 1637 Judson Avenue

City State Zip Code  
Evanston IL 60201

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

Name of Employer Occupation  
Morrison & Morrison CPA

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

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2009

**Transaction ID:** SA11AI.6390

Amount of Each Receipt this Period  
250.00

Conduit: JSTREET PAC

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 148  
(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  |
|                                     |     |                          |     |                          |     |                          | 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)  
SCHAKOWSKY FOR CONGRESS

A.

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Lois Zoller  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 5 / 1 5 / 2 0 0 9 |
| Mailing Address 3180 N. Lake Shore Drive #35D   |                                     | Transaction ID: SA11AI.6532                                   |
| City<br>Chicago   | State<br>IL                         | Zip Code<br>60657   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>1000.00                 |
| Name of Employer<br>Self-employed   | Occupation<br>Investor              |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |   |

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 189795.00 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 91 / 148  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Party of Norridge

Mailing Address 4000 N. Olcott Avenue

City Norridge State IL Zip Code 60706

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  
06 / 30 / 2009

Transaction ID: SA11B.5462

Amount of Each Receipt this Period  
1000.00

Permissible Funds

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 1000.00 |

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 92 / 148  
(check only one)  
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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
AFSCME P.E.O.P.L.E.  
Mailing Address 1625 L St., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

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  
0 4 / 0 7 / 2 0 0 9

**Transaction ID:** SA11C.5448

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AFSCME P.E.O.P.L.E.  
Mailing Address 1625 L St., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

**Transaction ID:** SA11C.5503

Amount of Each Receipt this Period  
4000.00

**C.** Full Name (Last, First, Middle Initial)  
Amalgamated Transit Union COPE  
Mailing Address 5025 Wisconsin Ave. NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C** C00032995

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  
0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5502

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
American Academy of Family Physicians PAC

Mailing Address 2021 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 08 / 2009

**Transaction ID:** SA11C.5522

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
American Academy of Neurology Professional Association BRAINPAC

Mailing Address 1501 M Street NW Seventh Floor

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00435933

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  
 06 / 01 / 2009

**Transaction ID:** SA11C.5475

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
American College of Physician Services aka ACP Services PAC

Mailing Address 25 Massachusettes Ave., NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00403881

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  
 05 / 22 / 2009

**Transaction ID:** SA11C.5498

Amount of Each Receipt this Period  
 1000.00

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

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

**SCHEDULE A (FEC Form 3 )  
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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
American College of Radiology Association PAC  
 Mailing Address 1891 Preston White Drive  
 City Reston State VA Zip Code 20191  
 Date of Receipt 06 / 01 / 2009  
**Transaction ID:** SA11C.5473  
 Amount of Each Receipt this Period 3000.00  
 FEC ID number of contributing federal political committee. **C** C00343459  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 5000.00

**B.** Full Name (Last, First, Middle Initial)  
American College of Surgeons Professional Association PAC  
 Mailing Address 1640 Wisconsin Avenue NW  
 City Washington State DC Zip Code 20007  
 Date of Receipt 06 / 08 / 2009  
**Transaction ID:** SA11C.5481  
 Amount of Each Receipt this Period 2500.00  
 FEC ID number of contributing federal political committee. **C** C00382424  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 2500.00

**C.** Full Name (Last, First, Middle Initial)  
American Gastroenterological Association PAC  
 Mailing Address 4720 Montgomery Lane Suite 430  
 City Bethesda State MD Zip Code 20814  
 Date of Receipt 06 / 30 / 2009  
**Transaction ID:** SA11C.5464  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00423228  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
American Optometric Assoc. PAC

Mailing Address 1505 Prince St., #300

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 8 / 2 0 0 9

**Transaction ID:** SA11C.5520

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Association for the Advancement of Psychology Psychologist for Leg Action Now (PLAN)

Mailing Address P.O. Box 38129

City State Zip Code  
Colorado Springs CO 80937

FEC ID number of contributing federal political committee. **C** C00002956

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  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5490

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Carpenters Legislative Improvement Committee

Mailing Address 101 Constitution Ave., NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

**Transaction ID:** SA11C.5452

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Citizens for Carol Ronen

Mailing Address 6033 N. Sheridan Rd.

City State Zip Code  
Chicago IL 60660

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

Name of Employer Occupation

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  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5512

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Citizens for David Orr

Mailing Address 1524 Touhy

City State Zip Code  
Chicago IL 60626

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 150.00

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

**Transaction ID:** SA11C.5517

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Citizens for Jeff Schoenberg

Mailing Address 1187 Wilmette Avenue, PMB 212

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation

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  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5514

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Citizens for Lou Lang  
Mailing Address P.O. Box 1815

City State Zip Code  
Skokie IL 60076

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  
 0 5 / 0 1 / 2 0 0 9

**Transaction ID:** SA11C.5483

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Citizens for Mary Ann Smith  
Mailing Address 5533 N. Broadway

City State Zip Code  
Chicago IL 60640

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  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5508

Amount of Each Receipt this Period  
450.00

**C.** Full Name (Last, First, Middle Initial)  
College of American Pathologists PAC  
Mailing Address 1350 I Street NW #590

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00274944

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  
 0 6 / 3 0 / 2 0 0 9

**Transaction ID:** SA11C.5466

Amount of Each Receipt this Period  
1000.00

**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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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Communications Workers of America COPE PCC  
Mailing Address 501 3rd Street NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9  
**Transaction ID:** SA11C.5467  
 Amount of Each Receipt this Period  
 4000.00

**B.** Full Name (Last, First, Middle Initial)  
Communications Workers of America COPE PCC  
Mailing Address 501 3rd Street NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9  
**Transaction ID:** SA11C.5468  
 Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
CVS/Caremark Corporation Employees PAC  
Mailing Address 1300 Eye Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00384818

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  
 0 6 / 0 8 / 2 0 0 9  
**Transaction ID:** SA11C.5519  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Drinker Biddle PAC

Mailing Address 1500 K Street, NW, Suite 1100

City State Zip Code  
Washington DC 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 ▼ 3000.00

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

**Transaction ID:** SA11C.5515

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Holland & Knight Effective Govt Cmte.

Mailing Address 2099 Pennsylvania Ave. NW #100

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

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  
 0 6 / 0 1 / 2 0 0 9

**Transaction ID:** SA11C.5470

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Illinois Political Active Letter Carriers

Mailing Address 15319 Woodmar

City State Zip Code  
Orland Park IL 60462

FEC ID number of contributing federal political committee. **C** C00264689

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  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.5492

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Intl. Brotherhood of Teamsters Drive Pol. Fund

Mailing Address 25 Louisiana Avenue, N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11C.5460

Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Intl. Union of Operating Engineers PAC

Mailing Address 1125 Seventeenth Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** SA11C.5445

Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Intl. Union of Operating Engineers PAC

Mailing Address 1125 Seventeenth Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** SA11C.5446

Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

**SCHEDULE A (FEC Form 3 )  
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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Ironworkers Political Action League

Mailing Address 1750 New York Ave., NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 05 / 2009  
**Transaction ID:** SA11C.5477  
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address P.O. Box 33106

City Washington State DC Zip Code 20033

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1145.00

Date of Receipt: 06 / 01 / 2009  
**Transaction ID:** SA11C.5472  
 Amount of Each Receipt this Period: 1145.00

**C.** Full Name (Last, First, Middle Initial)  
Marijuana Policy Project Medical Marijuana PAC

Mailing Address P.O. Box 77492

City Washington State DC Zip Code 20013

FEC ID number of contributing federal political committee. **C** C00389882

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** SA11C.5456  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3145.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 102 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Association PAC  
Mailing Address 1325 Massachusetts Avenue, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

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  
 0 5 / 2 2 / 2 0 0 9  
**Transaction ID:** SA11C.5494  
 Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
National Community Pharmacists Assn-PAC  
Mailing Address 100 Daingerfield Road

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9  
**Transaction ID:** SA11C.5458  
 Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
National Emergency Medicine PAC  
Mailing Address 1125 Executive Circle

City State Zip Code  
Irving TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

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  
 0 6 / 0 5 / 2 0 0 9  
**Transaction ID:** SA11C.5479  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Nat'l Cmte to Preserve Social Security PAC

Mailing Address 10 G Street, NE Suite 600

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00172296

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 22 / 2009  
**Transaction ID:** SA11C.5500  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
NEA Fund for Children & Public Education

Mailing Address 1201-16th Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 05 / 22 / 2009  
**Transaction ID:** SA11C.5504  
 Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
PAC of the American Association of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Ave., NE 1st Fl

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 22 / 2009  
**Transaction ID:** SA11C.5506  
 Amount of Each Receipt this Period: 2500.00

**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: PAGE 104 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
QUIGLEY FOR CONGRESS

Mailing Address PO Box 13040

City State Zip Code  
Chicago IL 60613

FEC ID number of contributing federal political committee. **C** C00457556

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 |
| 0 | 5 | / | 1 | 5 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11C.5487

Amount of Each Receipt this Period  
150.00

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
The Northern Trust Company PAC

Mailing Address 50 S. La Salle Street

City State Zip Code  
Chicago IL 60675

FEC ID number of contributing federal political committee. **C** C00024935

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 |
| 0 | 4 | / | 2 | 1 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11C.5526

Amount of Each Receipt this Period  
1500.00

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Transport Workers Union PCC

Mailing Address 80 West End

City State Zip Code  
New York NY 10023

FEC ID number of contributing federal political committee. **C** C00008268

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 |
| 0 | 4 | / | 2 | 1 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** SA11C.5450

Amount of Each Receipt this Period  
2500.00

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4150.00**

**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 105 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
United Auto Workers VCAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code  
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

**Transaction ID:** SA11C.5457

Amount of Each Receipt this Period  
 3000.00

**B.** Full Name (Last, First, Middle Initial)  
United Auto Workers VCAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code  
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

**Transaction ID:** SA11C.5488

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
United Food and Commercial Workers ABC

Mailing Address 1775 K Street N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

**Transaction ID:** SA11C.5496

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00

**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 106 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
United Parcel Service PAC

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY  
05 / 22 / 2009

Transaction ID: SA11C.5510

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
United Pilots PAC/Airline Pilots Association

Mailing Address 9550 W. Higgins Road

City Rosemont State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00251009

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY  
04 / 21 / 2009

Transaction ID: SA11C.5454

Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
United Transportation Union (UTU) PAC

Mailing Address 14600 Detroit Avenue

City Cleveland State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY  
06 / 08 / 2009

Transaction ID: SA11C.5524

Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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 107 / 148  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
University Public Issues Committee

Mailing Address P.O. Box 62

City State Zip Code  
Evanston IL 60204

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 0 9

Transaction ID: SA11C.5485

Amount of Each Receipt this Period  
150.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 150.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 84995.00 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 148  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Hyatt Regency Chicago

Mailing Address 161 E. Wacker Drive

City State Zip Code  
Chicago IL 60601

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
710.15

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

Transaction ID: SA14.5293

Amount of Each Receipt this Period  
710.15

Catering Refund

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 710.15 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 710.15 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 148  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Park National Bank

Mailing Address 2958 N. Milwaukee Avenue

City State Zip Code  
Chicago IL 60618

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1086.35

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

**Transaction ID:** SA15.5287

Amount of Each Receipt this Period  
175.16

Interest

**B.** Full Name (Last, First, Middle Initial)  
Park National Bank

Mailing Address 2958 N. Milwaukee Avenue

City State Zip Code  
Chicago IL 60618

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1255.86

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

**Transaction ID:** SA15.5290

Amount of Each Receipt this Period  
169.51

Interest

**C.** Full Name (Last, First, Middle Initial)  
Park National Bank

Mailing Address 2958 N. Milwaukee Avenue

City State Zip Code  
Chicago IL 60618

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1431.02

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

**Transaction ID:** SA15.5292

Amount of Each Receipt this Period  
175.16

Interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► **519.83**

**TOTAL** This Period (last page this line number only) ..... ► **519.83**

**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 110 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Access Living<br><hr/> Mailing Address 310 S. Peoria<br><hr/> City Chicago State IL Zip Code 60607<br><hr/> Purpose of Disbursement<br>Event Tickets<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  | Transaction ID: SB17.5295<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 0 / 2 0 0 9 |
|  | Amount of Each Disbursement this Period<br>300.00   |
|  | Category/<br>Type   |
|  | Category/<br>Type   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>ADP<br><hr/> Mailing Address 100 N. Northwest Pt. Road<br><hr/> City Elk Grove Village State IL Zip Code 60007<br><hr/> Purpose of Disbursement<br>Payroll Processing<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5299<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 1 / 2 0 0 9 |
|  | Amount of Each Disbursement this Period<br>72.20  |
|  | Category/<br>Type   |
|  | Category/<br>Type   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>ADP<br><hr/> Mailing Address 100 N. Northwest Pt. Road<br><hr/> City Elk Grove Village State IL Zip Code 60007<br><hr/> Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼      | Transaction ID: SB17.5297<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 5 / 2 0 0 9 |
|  | Amount of Each Disbursement this Period<br>475.17   |
|  | Category/<br>Type   |
|  | Category/<br>Type   |

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

**847.37**

**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)  
SCHAKOWSKY FOR CONGRESS

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Processing<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5300<br>Date of Disbursement<br>04 / 22 / 2009<br><br>Amount of Each Disbursement this Period<br>82.70  |
| B. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼      | Transaction ID: SB17.5298<br>Date of Disbursement<br>04 / 30 / 2009<br><br>Amount of Each Disbursement this Period<br>469.11 |
| C. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Service<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    | Transaction ID: SB17.5301<br>Date of Disbursement<br>05 / 06 / 2009<br><br>Amount of Each Disbursement this Period<br>72.20  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 624.01 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>ADP</p> <p>Mailing Address 100 N. Northwest Pt. Road</p> <p>City Elk Grove Village State IL Zip Code 60007</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> SB17.5302</p> <p>Date of Disbursement<br/>05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period<br/>469.09</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>ADP</p> <p>Mailing Address 100 N. Northwest Pt. Road</p> <p>City Elk Grove Village State IL Zip Code 60007</p> <p>Purpose of Disbursement<br/>Payroll Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5303</p> <p>Date of Disbursement<br/>05 / 20 / 2009</p> <p>Amount of Each Disbursement this Period<br/>72.20</p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>ADP</p> <p>Mailing Address 100 N. Northwest Pt. Road</p> <p>City Elk Grove Village State IL Zip Code 60007</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> SB17.5296</p> <p>Date of Disbursement<br/>05 / 29 / 2009</p> <p>Amount of Each Disbursement this Period<br/>466.31</p> |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1007.60</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
SCHAKOWSKY FOR CONGRESS

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Processing<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5305<br>Date of Disbursement<br>06 / 03 / 2009<br><br>Amount of Each Disbursement this Period<br>72.20  |
| B. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼      | Transaction ID: SB17.5307<br>Date of Disbursement<br>06 / 15 / 2009<br><br>Amount of Each Disbursement this Period<br>463.20 |
| C. | Full Name (Last, First, Middle Initial)<br>ADP<br><br>Mailing Address 100 N. Northwest Pt. Road<br><br>City Elk Grove Village State IL Zip Code 60007<br><br>Purpose of Disbursement Payroll Processing<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5306<br>Date of Disbursement<br>06 / 24 / 2009<br><br>Amount of Each Disbursement this Period<br>72.20  |

|  |               |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>607.60</b> |
| <b>TOTAL</b> 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)  
SCHAKOWSKY FOR CONGRESS

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>ADP</p> <p>Mailing Address 100 N. Northwest Pt. Road</p> <p>City Elk Grove Village State IL Zip Code 60007</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5304</p> <p>Date of Disbursement<br/>06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period<br/>463.23</p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Armour, Alex</p> <p>Mailing Address 4713 Port Clinton</p> <p>City Highland Park State IL Zip Code 60635</p> <p>Purpose of Disbursement<br/>Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> SB17.5314</p> <p>Date of Disbursement<br/>04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1881.24</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Armour, Alex</p> <p>Mailing Address 4713 Port Clinton</p> <p>City Highland Park State IL Zip Code 60635</p> <p>Purpose of Disbursement<br/>Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> SB17.5311</p> <p>Date of Disbursement<br/>04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1881.24</p> |

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

4225.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Armour, Alex</p> <p>Mailing Address 4713 Port Clinton</p> <p>City Highland Park State IL Zip Code 60635</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> SB17.5310</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1881.24"/></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Armour, Alex</p> <p>Mailing Address 4713 Port Clinton</p> <p>City Highland Park State IL Zip Code 60635</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5313</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p>    |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Armour, Alex</p> <p>Mailing Address 4713 Port Clinton</p> <p>City Highland Park State IL Zip Code 60635</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> SB17.5312</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1881.24"/></p> |

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |  |
|-----------|--|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Armour, Alex<br>Mailing Address 4713 Port Clinton<br>City Highland Park State IL Zip Code 60635<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼           | <b>Transaction ID:</b> SB17.5316<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period<br>1881.24 |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Armour, Alex<br>Mailing Address 4713 Port Clinton<br>City Highland Park State IL Zip Code 60635<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼           | <b>Transaction ID:</b> SB17.5315<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 3 0 / 2 0 0 9 | Amount of Each Disbursement this Period<br>1881.24 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>AT&T<br>Mailing Address P.O. Box 27-866<br>City Kansas City State MO Zip Code 64184<br>Purpose of Disbursement Telephone & Internet Service<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5321<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 9 | Amount of Each Disbursement this Period<br>505.95  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>4268.43</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
SCHAKOWSKY FOR CONGRESS

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T<br><hr/> Mailing Address P.O. Box 27-866<br><hr/> City Kansas City State MO Zip Code 64184<br><hr/> Purpose of Disbursement Telephone & Internet Service<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5320<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 0 5 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>500.12   |
|   | Category/Type   |
|   | Category/Type   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T<br><hr/> Mailing Address P.O. Box 27-866<br><hr/> City Kansas City State MO Zip Code 64184<br><hr/> Purpose of Disbursement Telephone Service<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            | Transaction ID: SB17.5319<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 0 3 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>531.30   |
|   | Category/Type   |
|   | Category/Type   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            | Transaction ID: SB17.5329<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>108.56   |
|   | Category/Type   |
|   | Category/Type   |

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

1139.98

**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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5326<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 13 / 2009 |
|  | Amount of Each Disbursement this Period<br>193.41                                     |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5327<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 13 / 2009 |
|  | Amount of Each Disbursement this Period<br>176.78                                     |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5322<br>Date of Disbursement<br>MM / DD / YYYY<br>04 / 30 / 2009 |
|  | Amount of Each Disbursement this Period<br>233.83                                     |

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

604.02

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5333<br>Date of Disbursement<br>05 / 04 / 2009 |
|  | Amount of Each Disbursement this Period<br>107.73                   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5330<br>Date of Disbursement<br>05 / 13 / 2009 |
|  | Amount of Each Disbursement this Period<br>175.90                   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5331<br>Date of Disbursement<br>05 / 13 / 2009 |
|  | Amount of Each Disbursement this Period<br>177.40                   |

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

**461.03**

**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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5323<br>Date of Disbursement<br>06 / 03 / 2009 |
|  | Amount of Each Disbursement this Period<br>107.76                   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5324<br>Date of Disbursement<br>06 / 03 / 2009 |
|  | Amount of Each Disbursement this Period<br>176.97                   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br>Mailing Address P.O. Box 6428<br>City Carol Stream State IL Zip Code 60197<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5325<br>Date of Disbursement<br>06 / 08 / 2009 |
|  | Amount of Each Disbursement this Period<br>177.81                   |

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

**462.54**

**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)  
SCHAKOWSKY FOR CONGRESS

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                | Transaction ID: SB17.5328<br>Date of Disbursement<br>06 / 08 / 2009 |
|   | Amount of Each Disbursement this Period<br>188.98                   |
|   | Category/Type   |
|   | [Empty Box]   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>AT&T Mobility<br><hr/> Mailing Address P.O. Box 6428<br><hr/> City Carol Stream State IL Zip Code 60197<br><hr/> Purpose of Disbursement Telephone<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                | Transaction ID: SB17.5332<br>Date of Disbursement<br>06 / 30 / 2009 |
|   | Amount of Each Disbursement this Period<br>286.34                   |
|   | Category/Type   |
|   | [Empty Box]   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Blue Cross Blue Shield of IL<br><hr/> Mailing Address PO Box 1364<br><hr/> City Chicago State IL Zip Code 60690<br><hr/> Purpose of Disbursement Health Insurance<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5335<br>Date of Disbursement<br>04 / 13 / 2009 |
|   | Amount of Each Disbursement this Period<br>762.28                   |
|   | Category/Type   |
|   | [Empty Box]   |

|  |   |             |
|--|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 1237.60     |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | [Empty Box] |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Blue Cross Blue Shield of IL<br><br>Mailing Address PO Box 1364<br><br>City Chicago State IL Zip Code 60690<br><br>Purpose of Disbursement Health Insurance<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5334<br>Date of Disbursement<br>06 / 10 / 2009<br><br>Amount of Each Disbursement this Period<br>827.02  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Broadway 55 LLC<br><br>Mailing Address 36 W. Rudolf #800<br><br>City Chicago State IL Zip Code 60601<br><br>Purpose of Disbursement Office Rent<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼             | Transaction ID: SB17.5338<br>Date of Disbursement<br>06 / 26 / 2009<br><br>Amount of Each Disbursement this Period<br>1200.00 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Centro Romero<br><br>Mailing Address 6216 N. Clark Street<br><br>City Chicago State IL Zip Code 60660<br><br>Purpose of Disbursement Advertisement<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼          | Transaction ID: SB17.5339<br>Date of Disbursement<br>04 / 27 / 2009<br><br>Amount of Each Disbursement this Period<br>150.00  |

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

2177.02

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

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|           |   |   |   |
|-----------|---|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Chase Card Services<br><br>Mailing Address PO Box 53084<br><br>City Atlanta State GA Zip Code 30353<br><br>Purpose of Disbursement<br>Itemized Transactions Below<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5154<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 9   | <b>Amount of Each Disbursement this Period</b><br>7156.91                           |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>O'Hare International Airport<br><br>Mailing Address P.O. Box 66142<br><br>City Chicago State IL Zip Code 60666<br><br>Purpose of Disbursement<br>Parking<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼          | <b>Transaction ID:</b> SB17.5154.1<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 9 | <b>Amount of Each Disbursement this Period</b><br>2.00<br><br><b>[MEMO ITEM]</b>    |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Postmaster of Evanston<br><br>Mailing Address 1101 Davis<br><br>City Evanston State IL Zip Code 60201<br><br>Purpose of Disbursement<br>Postage<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                   | <b>Transaction ID:</b> SB17.5154.2<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 3 / 2 0 0 9 | <b>Amount of Each Disbursement this Period</b><br>1270.98<br><br><b>[MEMO ITEM]</b> |

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

7156.91

**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)  
SCHAKOWSKY FOR CONGRESS

A.

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

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5154.4  
Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 3 |   | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

|        |
|--------|
| 739.20 |
|--------|

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Federal Express

Mailing Address Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5154.6  
Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 3 |   | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

|       |
|-------|
| 74.07 |
|-------|

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Wildfire

Mailing Address 159 W. Erie

City Chicago State IL Zip Code 60654

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5154.7  
Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 3 |   | 2 | 0 | 0 | 9 |

Amount of Each Disbursement this Period

|         |
|---------|
| 4384.44 |
|---------|

[MEMO ITEM]

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Constant Contact

Mailing Address 1601 Trapelo Road #329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Email Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB17.5154.10  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

Mailing Address PO Box 53084

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
Itemized Transactions Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB17.5182  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Postmaster of Evanston

Mailing Address 1101 Davis

City Evanston State IL Zip Code 60201

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB17.5182.0  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Petterino's Restaurant<br><hr/> Mailing Address 150 N Dearborn Street<br><hr/> City Chicago State IL Zip Code 60601<br><hr/> Purpose of Disbursement Catering<br>Candidate Name <span style="float: right;">Category/Type</span><br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5182.1<br>Date of Disbursement<br>05 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>578.91<br><hr/> [MEMO ITEM] |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>United Airlines<br><hr/> Mailing Address P.O. Box 66100<br><hr/> City Chicago State IL Zip Code 60666<br><hr/> Purpose of Disbursement Travel Expenses<br>Candidate Name <span style="float: right;">Category/Type</span><br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼        | Transaction ID: SB17.5182.4<br>Date of Disbursement<br>05 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>508.20<br><hr/> [MEMO ITEM] |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Constant Contact<br><hr/> Mailing Address 1601 Trapelo Road #329<br><hr/> City Waltham State MA Zip Code 02451<br><hr/> Purpose of Disbursement Email Service<br>Candidate Name <span style="float: right;">Category/Type</span><br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5182.6<br>Date of Disbursement<br>05 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>79.69<br><hr/> [MEMO ITEM]  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 0.00        |
| <b>TOTAL</b> 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)  
SCHAKOWSKY FOR CONGRESS

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Firehouse Grill<br><hr/> Mailing Address 750 Chicago Avenue<br><hr/> City Evanston State IL Zip Code 60202<br><hr/> Purpose of Disbursement<br>Food & Beverage<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼           | Transaction ID: SB17.5182.8<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 0 / 2 0 0 9  |
|   | Amount of Each Disbursement this Period<br>39.00   |
|   | [MEMO ITEM]  |
|   | Category/Type  |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Mei Wah<br><hr/> Mailing Address 1200 New Hampshire Avenue NW<br><hr/> City Washington State DC Zip Code 20036<br><hr/> Purpose of Disbursement<br>Food & Beverage<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼       | Transaction ID: SB17.5182.18<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 0 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>284.48  |
|   | [MEMO ITEM]  |
|   | Category/Type  |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Aviation Professionals<br><hr/> Mailing Address 6321 S, Central Avenue<br><hr/> City Chicago State IL Zip Code 60638<br><hr/> Purpose of Disbursement<br>Travel Expenses<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5182.24<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 0 / 2 0 0 9 |
|   | Amount of Each Disbursement this Period<br>713.76  |
|   | [MEMO ITEM]  |
|   | Category/Type  |

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |      |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
SCHAKOWSKY FOR CONGRESS

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Chase Card Services</p> <p>Mailing Address PO Box 53084</p> <p>City Atlanta State GA Zip Code 30353</p> <p>Purpose of Disbursement<br/>Itemized Transactions Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> SB17.5221</p> <p>Date of Disbursement<br/>06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>3550.29</p>                            |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Hyatt Regency Chicago</p> <p>Mailing Address 161 E. Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement<br/>Food &amp; Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5221.2</p> <p>Date of Disbursement<br/>06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>107.25</p> <p><b>[MEMO ITEM]</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>LAZ Park</p> <p>Mailing Address 25 N. Michigan Avenue</p> <p>City Chicago State IL Zip Code 60602</p> <p>Purpose of Disbursement<br/>Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                        | <p><b>Transaction ID:</b> SB17.5221.3</p> <p>Date of Disbursement<br/>06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>97.00</p> <p><b>[MEMO ITEM]</b></p>  |

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

3550.29

**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)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Postmaster of Evanston<br><br>Mailing Address 1101 Davis<br><br>City Evanston State IL Zip Code 60201<br><br>Purpose of Disbursement Postage<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼     | Transaction ID: SB17.5221.4<br>Date of Disbursement<br>06 / 10 / 2009<br><br>Amount of Each Disbursement this Period<br>222.00<br><br>[MEMO ITEM] |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Office Depot<br><br>Mailing Address 1916 Dempster<br><br>City Evanston State IL Zip Code 60202<br><br>Purpose of Disbursement Office Supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    | Transaction ID: SB17.5221.7<br>Date of Disbursement<br>06 / 10 / 2009<br><br>Amount of Each Disbursement this Period<br>115.75<br><br>[MEMO ITEM] |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>United Airlines<br><br>Mailing Address P.O. Box 66100<br><br>City Chicago State IL Zip Code 60666<br><br>Purpose of Disbursement Travel Expenses<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5221.8<br>Date of Disbursement<br>06 / 10 / 2009<br><br>Amount of Each Disbursement this Period<br>275.20<br><br>[MEMO ITEM] |

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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)  
SCHAKOWSKY FOR CONGRESS

|           |  |  |
|-----------|--|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Carey Limousine<br><hr/> Mailing Address 4530 Wisconsin Avenue NW # 500<br><hr/> City Washington State DC Zip Code 20016<br><hr/> Purpose of Disbursement Transportation<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5221.9<br>Date of Disbursement<br>06 / 10 / 2009<br><hr/> Amount of Each Disbursement this Period<br>694.35<br><hr/> [MEMO ITEM]  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Pompei Bakery<br><hr/> Mailing Address 212 E Ohio Street #1<br><hr/> City Chicago State IL Zip Code 60611<br><hr/> Purpose of Disbursement Catering<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                      | Transaction ID: SB17.5221.12<br>Date of Disbursement<br>06 / 10 / 2009<br><hr/> Amount of Each Disbursement this Period<br>613.78<br><hr/> [MEMO ITEM] |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Bistro Bis<br><hr/> Mailing Address 15 E Street NW<br><hr/> City Washington State DC Zip Code 20001<br><hr/> Purpose of Disbursement Catering<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                            | Transaction ID: SB17.5221.14<br>Date of Disbursement<br>06 / 10 / 2009<br><hr/> Amount of Each Disbursement this Period<br>848.70<br><hr/> [MEMO ITEM] |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 0.00        |
| <b>TOTAL</b> 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)

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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)  
SCHAKOWSKY FOR CONGRESS

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>O'Hare International Airport<br><hr/> Mailing Address P.O. Box 66142<br><hr/> City Chicago State IL Zip Code 60666<br><hr/> Purpose of Disbursement Parking<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   | Transaction ID: SB17.5221.15<br>Date of Disbursement<br>06 / 10 / 2009 |
|   | Amount of Each Disbursement this Period<br>32.00                       |
|   | [MEMO ITEM]  |
|   | Category/Type  |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Constant Contact<br><hr/> Mailing Address 1601 Trapelo Road #329<br><hr/> City Waltham State MA Zip Code 02451<br><hr/> Purpose of Disbursement Email Service<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5221.18<br>Date of Disbursement<br>06 / 10 / 2009 |
|   | Amount of Each Disbursement this Period<br>159.36                      |
|   | [MEMO ITEM]  |
|   | Category/Type  |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Gersten, Sarah<br><hr/> Mailing Address 3909 N. Sheridan #1H<br><hr/> City Chicago State IL Zip Code 60613<br><hr/> Purpose of Disbursement Salary<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            | Transaction ID: SB17.5356<br>Date of Disbursement<br>04 / 15 / 2009    |
|   | Amount of Each Disbursement this Period<br>3381.25                     |
|   | [MEMO ITEM]  |
|   | Category/Type  |

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

3381.25

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Gersten, Sarah

Transaction ID: SB17.5360  
Date of Disbursement

Mailing Address 3909 N. Sheridan #1H

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 0 | 9 |

City Chicago State IL Zip Code 60613

Amount of Each Disbursement this Period

|         |
|---------|
| 3381.25 |
|---------|

Purpose of Disbursement  
Salary

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Gersten, Sarah

Transaction ID: SB17.5359  
Date of Disbursement

Mailing Address 3909 N. Sheridan #1H

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 5 |   | 2 | 0 | 0 | 9 |

City Chicago State IL Zip Code 60613

Amount of Each Disbursement this Period

|         |
|---------|
| 3381.25 |
|---------|

Purpose of Disbursement  
Salary

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Gersten, Sarah

Transaction ID: SB17.5357  
Date of Disbursement

Mailing Address 3909 N. Sheridan #1H

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 0 | 9 |

City Chicago State IL Zip Code 60613

Amount of Each Disbursement this Period

|      |
|------|
| 9.00 |
|------|

Purpose of Disbursement  
Parking

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

|         |
|---------|
| 6771.50 |
|---------|

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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Gersten, Sarah</p> <p>Mailing Address 3909 N. Sheridan #1H</p> <p>City Chicago State IL Zip Code 60613</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>          | <p><b>Transaction ID:</b> SB17.5358</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="29"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3381.25"/></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Gersten, Sarah</p> <p>Mailing Address 3909 N. Sheridan #1H</p> <p>City Chicago State IL Zip Code 60613</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>          | <p><b>Transaction ID:</b> SB17.5354</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="15"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3381.25"/></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Gersten, Sarah</p> <p>Mailing Address 3909 N. Sheridan #1H</p> <p>City Chicago State IL Zip Code 60613</p> <p>Purpose of Disbursement Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5353</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="06"/> / <input type="text" value="17"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p>   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="6782.50"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

# 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)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |  |
|-----------|--|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Gersten, Sarah<br><hr/> Mailing Address 3909 N. Sheridan #1H<br><hr/> City Chicago State IL Zip Code 60613<br><hr/> Purpose of Disbursement Salary<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | <b>Transaction ID:</b> SB17.5355<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 3 0 / 2 0 0 9 | <b>Amount of Each Disbursement this Period</b><br>3381.25  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Hyatt Regency Chicago<br><hr/> Mailing Address 161 E. Wacker Drive<br><hr/> City Chicago State IL Zip Code 60601<br><hr/> Purpose of Disbursement Catering<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5365<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 5 / 0 6 / 2 0 0 9 | <b>Amount of Each Disbursement this Period</b><br>86534.72 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Ixia<br><hr/> Mailing Address 1630 Chicago Ave.<br><hr/> City Evanston State IL Zip Code 60201<br><hr/> Purpose of Disbursement Flowers<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    | <b>Transaction ID:</b> SB17.5375<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 7 / 2 0 0 9 | <b>Amount of Each Disbursement this Period</b><br>1000.00  |

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

90915.97

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Ixia<br>Mailing Address 1630 Chicago Ave.<br>City Evanston State IL Zip Code 60201<br>Purpose of Disbursement<br>Flowers for Event<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                          | <b>Transaction ID:</b> SB17.5374<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 5 / 1 2 / 2 0 0 9                  |
|   | Amount of Each Disbursement this Period<br>3464.00   |
|   | Category/<br>Type  |
|   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Ixia<br>Mailing Address 1630 Chicago Ave.<br>City Evanston State IL Zip Code 60201<br>Purpose of Disbursement<br>Flowers<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                                    | <b>Transaction ID:</b> SB17.5376<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 0 8 / 2 0 0 9                  |
|   | Amount of Each Disbursement this Period<br>190.00  |
|   | Category/<br>Type  |
|   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Lake Research Partners<br>Mailing Address 1730 Rhode Island Ave. NW, #1400<br>City Washington State DC Zip Code 20036<br>Purpose of Disbursement<br>Polling<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5381<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 9                  |
|   | Amount of Each Disbursement this Period<br>16242.50  |
|   | Category/<br>Type  |
|   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 19896.50 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | [ ]      |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
La Prairie, Dean

Mailing Address 4453 N. Paulina

City Chicago State IL Zip Code 60640

Purpose of Disbursement  
Photography

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5380  
Date of Disbursement

05 / 21 / 2009

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)  
Mid-City Printing

Mailing Address 5526 W. Montrose

City Chicago State IL Zip Code 60641

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5383  
Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

578.00

C.

Full Name (Last, First, Middle Initial)  
Mid-City Printing

Mailing Address 5526 W. Montrose

City Chicago State IL Zip Code 60641

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.5382  
Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

678.00

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

1656.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Moneris<br><br>Mailing Address 700 E. Lake Cook Road<br><br>City Buffalo Grove State IL Zip Code 60089<br><br>Purpose of Disbursement<br>Credit Card Processing Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5385<br>Date of Disbursement<br>04 / 03 / 2009<br><br>Amount of Each Disbursement this Period<br>37.29   |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Moneris<br><br>Mailing Address 700 E. Lake Cook Road<br><br>City Buffalo Grove State IL Zip Code 60089<br><br>Purpose of Disbursement<br>Credit Card Processing Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5386<br>Date of Disbursement<br>04 / 03 / 2009<br><br>Amount of Each Disbursement this Period<br>624.45  |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Moneris<br><br>Mailing Address 700 E. Lake Cook Road<br><br>City Buffalo Grove State IL Zip Code 60089<br><br>Purpose of Disbursement<br>Credit Card Processing Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5388<br>Date of Disbursement<br>05 / 05 / 2009<br><br>Amount of Each Disbursement this Period<br>1309.85 |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1971.59     |
| <b>TOTAL</b> 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)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Moneris

Transaction ID: SB17.5389  
Date of Disbursement

Mailing Address 700 E. Lake Cook Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 5 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Buffalo Grove IL 60089

Amount of Each Disbursement this Period

|        |
|--------|
| 141.06 |
|--------|

Purpose of Disbursement  
Credit Card Processing Fees

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Moneris

Transaction ID: SB17.5384  
Date of Disbursement

Mailing Address 700 E. Lake Cook Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 4 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Buffalo Grove IL 60089

Amount of Each Disbursement this Period

|         |
|---------|
| 2114.44 |
|---------|

Purpose of Disbursement  
Credit Card Processing Fees

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Moneris

Transaction ID: SB17.5387  
Date of Disbursement

Mailing Address 700 E. Lake Cook Road

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 4 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Buffalo Grove IL 60089

Amount of Each Disbursement this Period

|        |
|--------|
| 114.89 |
|--------|

Purpose of Disbursement  
Credit Card Processing Fees

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

|         |
|---------|
| 2370.39 |
|---------|

**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)  
SCHAKOWSKY FOR CONGRESS

|    |   |   |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial)<br>Park Ridge Fine Arts Society<br><br>Mailing Address P.O. Box 89A<br><br>City Park Ridge State IL Zip Code 60068<br><br>Purpose of Disbursement<br>Advertisement<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.5397<br>Date of Disbursement<br>04 / 21 / 2009<br><br>Amount of Each Disbursement this Period<br>250.00<br><br>Category/<br>Type |
| B. | Full Name (Last, First, Middle Initial)<br>Reyna, Fernando<br><br>Mailing Address 1915 W. Summerdale<br><br>City Chicago State IL Zip Code 60640<br><br>Purpose of Disbursement<br>Office Cleaning<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼         | Transaction ID: SB17.5398<br>Date of Disbursement<br>06 / 26 / 2009<br><br>Amount of Each Disbursement this Period<br>140.00<br><br>Category/<br>Type |
| C. | Full Name (Last, First, Middle Initial)<br>Tchen, Tina<br><br>Mailing Address 5444 N. Magnolia<br><br>City Chicago State IL Zip Code 60640<br><br>Purpose of Disbursement<br>Travel Expenses<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               | Transaction ID: SB17.5407<br>Date of Disbursement<br>05 / 09 / 2009<br><br>Amount of Each Disbursement this Period<br>508.20<br><br>Category/<br>Type |

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

**898.20**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 140 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|           |  |   |   |
|-----------|--|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5412<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period<br>735.00 |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5413<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 9 | Amount of Each Disbursement this Period<br>735.00 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5410<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 5 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period<br>735.00 |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>2205.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

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

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)  
SCHAKOWSKY FOR CONGRESS

|           |   |   |   |
|-----------|---|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                | <b>Transaction ID:</b> SB17.5411<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 5 / 2 9 / 2 0 0 9 | Amount of Each Disbursement this Period<br>735.00 |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Salary<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                | <b>Transaction ID:</b> SB17.5409<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period<br>735.00 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Tuite, Jacque<br>Mailing Address 2212 W. Palmer<br>City Chicago State IL Zip Code 60647<br>Purpose of Disbursement Parade Transportation<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB17.5414<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>0 6 / 2 9 / 2 0 0 9 | Amount of Each Disbursement this Period<br>20.00  |

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

1490.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 142 / 148

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <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)  
SCHAKOWSKY FOR CONGRESS

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Tuite, Jacque</p> <p>Mailing Address 2212 W. Palmer</p> <p>City Chicago State IL Zip Code 60647</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>                 | <p><b>Transaction ID:</b> SB17.5408</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="735.00"/></p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>West Side Realty</p> <p>Mailing Address 300 S. Ashland 105</p> <p>City Chicago State IL Zip Code 60607</p> <p>Purpose of Disbursement Facility Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> SB17.5420</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="275.00"/></p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Yes Promotions, Inc.</p> <p>Mailing Address 750 N. Franklin</p> <p>City Chicago State IL Zip Code 60610</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>       | <p><b>Transaction ID:</b> SB17.5422</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6449.63"/></p> |

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

**7459.63**

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

**180626.52**

**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 143 / 148

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Constance Dickinson

Transaction ID: SB20A.7340  
Date of Disbursement

Mailing Address 205 West Wacker Drive, Suite 1800

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

City State Zip Code  
Chicago IL 60606

Amount of Each Disbursement this Period

|        |
|--------|
| 300.00 |
|--------|

Purpose of Disbursement  
Contribution Refund

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

|        |
|--------|
| 300.00 |
|--------|

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

|        |
|--------|
| 300.00 |
|--------|





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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

|    |   |  |  |
|----|---|--|--|
| A. | Full Name (Last, First, Middle Initial)<br><b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>   | <b>Transaction ID:</b> SB21.5261<br>Date of Disbursement<br>06 / 12 / 2009 |  |
|    | Mailing Address 430 South Capitol Street, SE<br>2nd Floor   |  |  |
|    | City Washington State DC Zip Code 20003   | Amount of Each Disbursement this Period<br>60000.00                        |  |
|    | Purpose of Disbursement Unlimited Transfer<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼                                       | Category/Type  |  |
| B. | Full Name (Last, First, Middle Initial)<br><b>DINA TITUS FOR CONGRESS</b>   | <b>Transaction ID:</b> SB21.5277<br>Date of Disbursement<br>06 / 26 / 2009 |  |
|    | Mailing Address P. O. Box 50614<br>Suite C5   |  |  |
|    | City Henderson State NV Zip Code 89016  | Amount of Each Disbursement this Period<br>1000.00                         |  |
|    | Purpose of Disbursement Contribution<br>Candidate Name DINA TITUS<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NV District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type  |  |
| C. | Full Name (Last, First, Middle Initial)<br><b>Friends of Debra Shore</b>  | <b>Transaction ID:</b> SB21.5429<br>Date of Disbursement<br>06 / 22 / 2009 |  |
|    | Mailing Address P.O. Box 4674   |  |  |
|    | City Skokie State IL Zip Code 60077   | Amount of Each Disbursement this Period<br>500.00                          |  |
|    | Purpose of Disbursement Contribution<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼   | Category/Type  |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 61500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |          |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Friends of Juli Hamos

Mailing Address P.O. Box 5308

City State Zip Code  
Evanston IL 60204

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21.5431  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Glenview State Bank for the Jeff Otaka Fund

Mailing Address 800 Waukegan Road

City State Zip Code  
Glenview IL 60025

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21.5433  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
GRIFFITH FOR CONGRESS

Mailing Address PO BOX 2916

City State Zip Code  
Huntsville AL 35804

Purpose of Disbursement  
Contribution

Candidate Name  
PARKER DR. GRIFFITH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AL District: 05

Transaction ID: SB21.5268  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
HARRY TEAGUE FOR CONGRESS

Mailing Address PO BOX 5153  
PO BOX 5153

City HOBBS State NM Zip Code 88241

Purpose of Disbursement  
Contribution

Candidate Name  
HARRY TEAGUE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NM District: 02

Transaction ID: SB21.5280  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
HOOSIERS FOR HILL

Mailing Address PO Box 1071

City Seymour State IN Zip Code 47274

Purpose of Disbursement  
Contribution

Candidate Name  
BARON PAUL HILL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Transaction ID: SB21.5274  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
KURT SCHRADER FOR CONGRESS

Mailing Address 2236 SE 10th Ave  
Suite 240

City Portland State OR Zip Code 97214

Purpose of Disbursement  
Contribution

Candidate Name  
KURT SCHRADER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Transaction ID: SB21.5271  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 148

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

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NAME OF COMMITTEE (In Full)  
SCHAKOWSKY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Lane Evans Health Care & Assisted Living Fund

Transaction ID: SB21.5437

Date of Disbursement

Mailing Address 1600 4th Avenue #405

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 4 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Rock Island IL 61201

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Purpose of Disbursement  
Donation

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
MARTIN HEINRICH FOR CONGRESS, INC.

Transaction ID: SB21.5283

Date of Disbursement

Mailing Address 2118 CENTRAL AVENUE SE  
#71

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 6 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Albuquerque NM 87106

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Contribution

|  |
|--|
|  |
|--|

Candidate Name  
MARTIN HEINRICH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  Primary  General  
 Other (specify) ▼

State: NM District: 01

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

|         |
|---------|
| 3000.00 |
|---------|

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

|          |
|----------|
| 72020.00 |
|----------|