

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

Hastert for Congress Committee

ADDRESS (number and street) **Check if different than previously reported. (ACC)**

P. O. Box 625
Batavia IL 60510

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
STATE **DISTRICT**

C00208090 IS THIS REPORT NEW (N) OR AMENDED (A)
 IL 14

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 11 07 2006 in the State of IL

5. Covering Period 10 19 2006 through 11 27 2006

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 Dallas Ingemunson

Signature of Treasurer Electronically Filed by Dallas Ingemunson Date 04 15 2007

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Hastert for Congress Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	311492.84	5016154.39
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	24325.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	311492.84	4991829.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	729905.49	4369159.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	5000.00	10141.94
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	724905.49	4359017.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11829.23	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	145146.43	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
. If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Hastert for Congress Committee

Report Covering the Period: From: 10 19 2006 To: 11 27 2006

I. RECEIPTS

Table with 3 columns: COLUMN A Total this Period, COLUMN B Election Cycle Total as of, COLUMN C Total for. Rows include 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A), (ii) Unitemized, (iii) Total of contributions from individuals, (b) Political Party Committees, (c) Other Political Committees.

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate 0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) 311492.84	5016154.39	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 0.00	0.00	0.00
13. LOANS: (a) Made or Guaranteed by the Candidate 0.00	0.00	0.00
(b). All Other Loans 0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b)) 0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc) 5000.00	10141.94	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc) 817.10	39801.53	5.71
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) 317309.94	5066097.86	5.71

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Hastert for Congress Committee

Report the covering period

From:

10

19

2006

To:

11

27

2006

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
729905.49	4369159.18	267135.47
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	13825.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

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Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	10500.00	0.00
------	----------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

0.00	24325.00	0.00
------	----------	------

21. OTHER DISBURSEMENTS

25050.00	780569.72	0.00
----------	-----------	------

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

754955.49	5174053.90	267135.47
-----------	------------	-----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

311492.84	4991829.39	0.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

724905.49	4359017.24	267135.47
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	449474.78
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	317309.94
25. SUBTOTAL(add Line 23 and Line 24)	766784.72
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	754955.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	11829.23

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 151
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Amer. Electric Power PAC

Full Name (Last, First, Middle Initial)
Amer. Electric Power PAC

Mailing Address 1 Riverside Plaza, 26th floor
P.O. Box 16036

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

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

Transaction ID: 61202.C47910

Amount of Each Receipt this Period
2000.00

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

B. Amer. Gas Assoc. PAC

Full Name (Last, First, Middle Initial)
Amer. Gas Assoc. PAC

Mailing Address 400 N. Captial St., NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

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

Transaction ID: 61102.C47810

Amount of Each Receipt this Period
1000.00

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

C. Americas Comm. Bankers PAC

Full Name (Last, First, Middle Initial)
Americas Comm. Bankers PAC

Mailing Address 900 19th St. NW, Ste. 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00001875

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47794

Amount of Each Receipt this Period
1000.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

A. Americas Health Insurance PAC

Full Name (Last, First, Middle Initial)
Americas Health Insurance PAC

Mailing Address 601 Pennsylvania Ave. N.W.
Suite 500

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61202.C47916

Amount of Each Receipt this Period
5000.00

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

B. American Clinical Laboratory PAC

Full Name (Last, First, Middle Initial)
American Clinical Laboratory PAC

Mailing Address 1250 H Street, N.W.
Suite 880

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00410084

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47785

Amount of Each Receipt this Period
1500.00

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

C. American Hospital Assoc. PAC

Full Name (Last, First, Middle Initial)
American Hospital Assoc. PAC

Mailing Address 325 Seventh St., NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

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

Transaction ID: 61020.C47453

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Americans United in Support of Democracy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 350 W. Hubbard Suite 610		Transaction ID: 61026.C47699	
City Chicago	State IL	Amount of Each Receipt this Period 2500.00	
Zip Code 60610		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C C00113019			
Name of Employer N/A	Occupation N/A		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. AstraZeneca PAC		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address PO Box 15438		Transaction ID: 61202.C47923	
City Wilmington	State DE	Amount of Each Receipt this Period 1000.00	
Zip Code 19850-5438		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C C00279455			
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00		

Full Name (Last, First, Middle Initial) C. Because I Care PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 6017 Old Ocean Blvd.		Transaction ID: 61026.C47700	
City Ocean Ridge	State FL	Amount of Each Receipt this Period 5000.00	
Zip Code 33435		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C C00381624			
Name of Employer N/A	Occupation N/A		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

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

Mailing Address 14 Cambridge Center

City Winchester State MA Zip Code 01890

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

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61102.C47837

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
Biotechnology Industry Org. PAC

Mailing Address 1625 K. Street, NW, Ste. 1100

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00355677

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47786

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Blue Cross & Blue Shield Assoc. PAC

Mailing Address 1310 G Street, NW, 12th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: 61020.C47451

Amount of Each Receipt this Period
 5000.00

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

SUBTOTAL of Receipts This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

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

Mailing Address 1201 Pennsylvania Ave. N.W.
Suite 315

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00420398

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47912

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
BP North Amer. Emp. PAC

Mailing Address 28100 Torch Parkway, Mail Code 5N

City Warrenville State IL Zip Code 60555

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2006

Transaction ID: 61101.C47774

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Bracewell & Giuliani PAC

Mailing Address 2000 K St., NW, Ste. 500

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00021295

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3100.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 61102.C47820

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

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

Mailing Address P. O. Box 1080

City State Zip Code
Louisville KY 40210

FEC ID number of contributing federal political committee. **C** C00059733

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61026.C47676

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Building Our Bases PAC (B.O.B.S)

Mailing Address 228 S. Washington Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00334904

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

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

Transaction ID: 61026.C47742

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 601 Penn. Ave., NW, Ste. 540

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00423442

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61202.C47953

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 151
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
CF Industries Employees Good Government

Mailing Address One Salem Lake Dr.

City State Zip Code
Long Grove IL 60047

FEC ID number of contributing federal political committee. **C** C00076588

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61102.C47834

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address P. O. Box 1198

City State Zip Code
Chicago IL 60690-1198

FEC ID number of contributing federal political committee. **C** C00187526

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61026.C47701

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Clear Channel Communications PAC

Mailing Address 1401 I Street NW Suite 401

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47789

Amount of Each Receipt this Period
1500.00

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Constellation Energy Fed. PAC

Mailing Address 750 E. Pratt St., 5th Floor

City State Zip Code
Baltimore MD 21202

FEC ID number of contributing federal political committee. **C** C00041376

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

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

Transaction ID: 61202.C47918

Amount of Each Receipt this Period
5000.00

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

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

Mailing Address One Tower Lane

City State Zip Code
Oakbrook Terrace IL 60181

FEC ID number of contributing federal political committee. **C** C00198606

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47793

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Dial Corp. Employees PAC

Mailing Address 15501 N. Dial Blvd.

City State Zip Code
Scottsdale AZ 85260-1619

FEC ID number of contributing federal political committee. **C** C00321083

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47745

Amount of Each Receipt this Period
1750.00

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

SUBTOTAL of Receipts This Page (optional)	6850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

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

Mailing Address 444 N. Capitol Street, NW
Suite 728

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: 61027.C47747

Amount of Each Receipt this Period
2500.00

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

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

Mailing Address 1001 Penn. Ave., NW, Ste. 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00410050

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61027.C47749

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Edison Intl Companies Fed PAC

Mailing Address 2244 Walnut Grove Ave.

City Rosemead State CA Zip Code 91770

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

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

Transaction ID: 61102.C47836

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 151
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Electric Power Supply Assn. PAC

Mailing Address 1401 New York Ave. N.W.
11 th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00326009

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61027.C47751

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Fed. of Amer. Hospitals PAC

Mailing Address 801 Penn. Ave, NW, Ste. 245

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: 61026.C47678

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
Financial Services Roundtable PAC

Mailing Address 805 15th St., NW, Ste. 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61027.C47760

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Florida Sugarcane League PAC

Mailing Address 1301 Pennsylvania Ave. NW
Suite 401

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00012328

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61026.C47670

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Fluor Public Affairs Comm.

Mailing Address 403 East Capitol St., SE

City Washington State DC Zip Code 20003

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

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 6

Transaction ID: 61202.C47942

Amount of Each Receipt this Period
1500.00

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

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

Mailing Address 429 B North Weber Rd. #253

City Romeoville State IL Zip Code 60446

FEC ID number of contributing federal political committee. **C** C00348524

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47795

Amount of Each Receipt this Period
2000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Friends of Israel PAC

Mailing Address 55 Raycliff Terrace

City San Francisco State CA Zip Code 94115

FEC ID number of contributing federal political committee. **C** C00141747

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

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

Transaction ID: 61026.C47705

Amount of Each Receipt this Period
 3000.00

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

B. Full Name (Last, First, Middle Initial)
Friends of LaHood

Mailing Address 4238 N. Knoxville Ave.

City Peoria State IL Zip Code 61614

FEC ID number of contributing federal political committee. **C** C00284901

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61102.C47811

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Friends of Phil Gramm PAC

Mailing Address P. O. Box 963

City Helotes State TX Zip Code 78023

FEC ID number of contributing federal political committee. **C** C00253971

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61102.C47815

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

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

Mailing Address 1130 17th St., NW, Ste. 410

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00387894

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61202.C47943

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address Number One General Mills Blvd.

City Minneapolis State MN Zip Code 55426

FEC ID number of contributing federal political committee. **C** C00062646

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47468

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address P.O. Box 315

City Carbondale State PA Zip Code 18407

FEC ID number of contributing federal political committee. **C** C00386128

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47802

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **5000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

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

Mailing Address 1020 19th St. NW
Suite 550

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00393736

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61102.C47830

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
Harrahs Entertainment Inc. Employee PAC

Mailing Address 1023 Cherry Rd.

City Memphis State TN Zip Code 38117

FEC ID number of contributing federal political committee. **C** C00239947

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

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

Transaction ID: 61020.C47458

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
Heineken USA Good Govt Fund

Mailing Address 360 Hamilton Ave. Ste. 1103

City White Plains State NY Zip Code 10601

FEC ID number of contributing federal political committee. **C** C00358234

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: 61027.C47763

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional)	10500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Intl Truck & Engine Corp. Good Govt

Mailing Address P. O. Box 1408

City Warrenville State IL Zip Code 60555

FEC ID number of contributing federal political committee. **C** C00040840

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61102.C47838

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 591 Redwood Hwy, Bldg. 4000

City Mill Valley State CA Zip Code 94941

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

Transaction ID: 61202.C47950

Amount of Each Receipt this Period
 2500.00

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

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

Mailing Address 16011 N. E. 36th Way
Box 97017

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

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

Transaction ID: 61102.C47829

Amount of Each Receipt this Period
 2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Mid America Federal PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 55th & Holmes		Transaction ID: 61026.C47672
City State Zip Code Clarendon Hills IL 60514	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00209841		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation N/A N/A	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. Natl Assoc of Ins. & Financial Advisors		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 2901 Telestar Ct.		Transaction ID: 61026.C47671
City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00005249		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation N/A N/A	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) C. Natl Assoc. of Spine Specialists		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 22 Calendar Ct., 2nd Fl.		Transaction ID: 61101.C47773
City State Zip Code La Grange IL 60525	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00349225		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation N/A N/A	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 4500.00		

SUBTOTAL of Receipts This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: PAGE 23 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Natl Corn Growers Assoc. PAC

Mailing Address 122 C. St., NW, Ste. 510

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00376343

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

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

Transaction ID: 61202.C47917

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
National Action Comm. PAC

Mailing Address 601 Brickell Key Dr., Ste. 801

City State Zip Code
Miami FL 33131

FEC ID number of contributing federal political committee. **C** C00147983

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

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

Transaction ID: 61026.C47712

Amount of Each Receipt this Period
4000.00

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

C. Full Name (Last, First, Middle Initial)
Nethercutt for Senate PAC

Mailing Address 9720 Owen Brown Rd.

City State Zip Code
Columbia MD 21045

FEC ID number of contributing federal political committee. **C** C00389239

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61027.C47752

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
New York Mercantile Exchange PAC

Mailing Address One North End Ave, 14th FL, WFC

City State Zip Code
New York NY 10282

FEC ID number of contributing federal political committee. **C** C00230185

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

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

Transaction ID: 61102.C47831

Amount of Each Receipt this Period
5000.00

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

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

Mailing Address 607 14th St., NW, Ste. 530

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00115972

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61102.C47833

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Nuclear Energy Institute PAC

Mailing Address 1776 Eye St., NW, 4th Fl.

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: 61102.C47808

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 151
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) Pharmaceutical Care Mgmt. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 601 Pennsylvania Ave. N.W. Suite 740		Transaction ID: 61101.C47776	
City State Zip Code Washington DC 20004		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00388819		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation N/A N/A			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Pinnacle West PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address MS 9020 P.O. Box 53999		Transaction ID: 61101.C47777	
City State Zip Code Phoenix AZ 85072-3999		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00015933		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation N/A N/A			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

C. Full Name (Last, First, Middle Initial) Power PAC Edison Electric Institute		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 701 Pennsylvania Ave.		Transaction ID: 61102.C47809	
City State Zip Code Washington DC 20004		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00095869		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation N/A N/A			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 26 / 151
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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) Prof. Casualty Insurers PAC Mailing Address 2600 S. River Rd. City State Zip Code Des Plaines IL 60018 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61102.C47828 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	6	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	1	/	2	0	0	6														
1000.00																							
Name of Employer Occupation N/A N/A Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

B. Full Name (Last, First, Middle Initial) Progress Energy PAC Mailing Address P. O. Box 1510 City State Zip Code Raleigh NC 27602 FEC ID number of contributing federal political committee. C C00091884		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61105.C47841 Amount of Each Receipt this Period <table border="1"> <tr> <td>3000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	6	3000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	4	/	2	0	0	6														
3000.00																							
Name of Employer Occupation N/A N/A Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>5000.00</td> </tr> </table>		5000.00																					
5000.00																							

C. Full Name (Last, First, Middle Initial) Real Estate Inv. Trusts PAC Mailing Address 1875 I St. NW, Ste. 600 City State Zip Code Washington DC 20006 FEC ID number of contributing federal political committee. C C00303339		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61101.C47771 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	6	2000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	6														
2000.00																							
Name of Employer Occupation N/A N/A Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>7000.00</td> </tr> </table>		7000.00																					
7000.00																							

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 151
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Hastert for Congress Committee

A. Recording Industry of Amer. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1330 Connecticut Ave., NW, Ste. 30

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009357

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61202.C47952

Amount of Each Receipt this Period
 2000.00

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

B. Science Applications Intl Corp. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 10260 Campus Point Dr., F2

City San Diego State CA Zip Code 92121

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

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

Transaction ID: 61026.C47744

Amount of Each Receipt this Period
 1750.00

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

C. Southern Nuclear Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 1295

City Birmingham State AL Zip Code 35201

FEC ID number of contributing federal political committee. **C** C00250407

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

Transaction ID: 61102.C47826

Amount of Each Receipt this Period
 2500.00

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

SUBTOTAL of Receipts This Page (optional)	6250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Tesoro Petroleum Corp. PAC

Mailing Address 300 Concord Plaza Drive

City San Antonio State TX Zip Code 78216

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61027.C47762

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
To Protect Our Heritage PAC

Mailing Address 2421 W. Pratt

City Chicago State IL Zip Code 60645

FEC ID number of contributing federal political committee. **C** C00135541

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5700.00

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

Transaction ID: 61026.C47723

Amount of Each Receipt this Period
 5000.00

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

C. Full Name (Last, First, Middle Initial)
U.S. Cellular PAC

Mailing Address 8410 W. Bryn Mawr Ave.

City Chicago State IL Zip Code 60631

FEC ID number of contributing federal political committee. **C** C00336057

Name of Employer N/A Occupation N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61102.C47832

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

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

Mailing Address 6903 Rockledge Dr.
10th Floor, Room 1018

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing federal political committee. **C** C00355719

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61105.C47844

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Vanguard Health Management Inc. PAC

Mailing Address 20 Burton Hills Blvd.
Suite 100

City State Zip Code
Nashville TN 37215

FEC ID number of contributing federal political committee. **C** C00380402

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: 61026.C47677

Amount of Each Receipt this Period
2500.00

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

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

Mailing Address 1501 M Street, NW, Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47784

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Vonage Holdings Corp. PAC

Mailing Address 23 Main Street

City State Zip Code
Holmdel NJ 07733

FEC ID number of contributing federal political committee. **C** C00408989

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47787

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
White Castle System PAC

Mailing Address 555 W. Goodale St.

City State Zip Code
Columbus OH 43215

FEC ID number of contributing federal political committee. **C** C00112623

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: 61020.C47457

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Wine & Spirits Wholesalers of America

Mailing Address 805 Fifteenth St., NW, Ste. 430

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

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

Transaction ID: 61102.C47825

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	6250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 151
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Womens Alliance For Israel

Mailing Address 30151 Thomas St.

City State Zip Code
Rncho Snta Mrgrita CA 92688

FEC ID number of contributing federal political committee. **C** C00236596

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

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

Transaction ID: 61026.C47725

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
Wyeth Good Govt Fund

Mailing Address Five Giralda Farms

City State Zip Code
Madison NJ 07940

FEC ID number of contributing federal political committee. **C** C00115303

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47732

Amount of Each Receipt this Period
2500.00

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

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

Mailing Address 325 7th St., NW, Ste. 1225

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: 61027.C47748

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	163350.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Phyllis Apelbaum

Mailing Address 1300 N. Lake Shore Dr., Apt. 10D

City State Zip Code
Chicago IL 60610

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

Name of Employer Arrow Messenger Service Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: 61026.C47682

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Mary Jo Arndt

Mailing Address 35 S. Stewart

City State Zip Code
Lombard IL 60148

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

Name of Employer Lombard Vet. Hospital Occupation Co-owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47486

Amount of Each Receipt this Period
350.00

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

NOTE:Refund issued 12/7/06

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

Mailing Address 7 Carriage Ln.

City State Zip Code
Lemont IL 60439

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

Name of Employer IL Manufacturing Assoc. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1300.00

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

Transaction ID: 61026.C47680

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 33 / 151
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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Ken Baumann

Mailing Address P. O. Box 6594

City State Zip Code
Aurora IL 60598

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

Name of Employer
Self Employed

Occupation
Real Estate Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61202.C47936

Amount of Each Receipt this Period
500.00

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

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

Mailing Address P. O. Box 66

City State Zip Code
Wayne IL 60184

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

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3775.00

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

Transaction ID: 61202.C47873

Amount of Each Receipt this Period
175.00

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

C. Full Name (Last, First, Middle Initial)
Robert H. Bradner

Mailing Address 207 Audreys Ct., SE

City State Zip Code
Vienna VA 22180

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

Name of Employer
Holland & Knight

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: 61202.C47921

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	925.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Bill K. Brewster

Mailing Address P.O. Box 459

City State Zip Code
Batesville TX 78829

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

Name of Employer Capitol Hill Group Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47911

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 200 E. Walton Pl.

City State Zip Code
Chicago IL 60611

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2006

Transaction ID: 61101.C47769

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 7N029 Whispering Trail

City State Zip Code
Saint Charles IL 60175-6364

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

Name of Employer Gusto Packing Company Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2006

Transaction ID: 61020.C47452

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Neil F. Cadigan

Mailing Address 19 Arrow Circle

City State Zip Code
Reading MA 01867

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47869

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 547 Yellowstone Ln.

City State Zip Code
Yorkville IL 60560

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

Name of Employer Information Requested Occupation Information Requested
Cano Container Corp. CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1925.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2006

Transaction ID: 61027.C47761

Amount of Each Receipt this Period
175.00

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

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

Mailing Address 8819 Kensington Pkwy.

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Information Requested Occupation Information Requested
Verizon Fed. Govt. Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2006

Transaction ID: 61101.C47781

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Margaret Caravelli

Mailing Address 413 Prince St., Apt. 2

City State Zip Code
Alexandria VA 22314

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61105.C47849

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 5213 Howard Ave.

City State Zip Code
Western Springs IL 60558

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID: 61026.C47669

Amount of Each Receipt this Period
1500.00

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

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

Mailing Address 11 S. LaSalle, Ste. 1600

City State Zip Code
Chicago IL 60603

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47770

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4100.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Michael Chappell

Mailing Address 1221 S. Eads St., #1716

City State Zip Code
Arlington VA 22202

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

Name of Employer Occupation
Fierce, Isakowitz & Blalock Govt Relations

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 61102.C47812

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Robert T. Clarke

Mailing Address 1175 W. Lawrence Ave.

City State Zip Code
Springfield IL 62704

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

Name of Employer Occupation
Memorial Health Systems Pres. - CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2006

Transaction ID: 61102.C47823

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Sharon L. Cohen

Mailing Address 1001 G Street, Ste. 900

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
Podesta Mattoon Principal

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 61102.C47804

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Patricia Coleman

Mailing Address 281 W. Washington

City State Zip Code
Oswego IL 60543

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

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

Transaction ID: 61202.C47862

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 112 Johanna Dr.

City State Zip Code
Sandwich IL 60548

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

Name of Employer Henderson Eng. Co., Inc. Occupation Plant Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61202.C47931

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 900 W. Bridgetowne Ct.

City State Zip Code
Dunlap IL 61525

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

Name of Employer Caterpillar Inc. Occupation Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: 61105.C47843

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Federico DEscoto

Mailing Address 1965 N. Marywood

City Aurora State IL Zip Code 60505

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

Name of Employer Self Employed Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47738

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 708 Mildred Dr.

City Marengo State IL Zip Code 60152

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

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

Transaction ID: 61202.C47875

Amount of Each Receipt this Period
175.00

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

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

Mailing Address 7721 Lee Ave.

City Alexandria State VA Zip Code 22308

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

Name of Employer Verizon Occupation VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61027.C47756

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3175.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Frederick Dombo

Mailing Address 3504 Morrison St. NW

City Washington State DC Zip Code 20015

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

Name of Employer Ryan, Phillips, Utrecht & Mck. Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47803

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 211 Union Ave.

City Batavia State IL Zip Code 60510

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

Name of Employer Lucent Technologies Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47484

Amount of Each Receipt this Period
 350.00

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

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

Mailing Address 106 W. Bartlett Ave.

City Bartlett State IL Zip Code 60103

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2050.00

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

Transaction ID: 61026.C47735

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Terry Ekl

Mailing Address 45 Muirfield

City State Zip Code
Wheaton IL 60187

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

Name of Employer Self Employed Occupation
Self Employed Attorney

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

1000.00

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

Transaction ID: 61027.C47766

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1075 Westridge Dr.

City State Zip Code
Portola Valley CA 94028

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

Name of Employer Self Employed Occupation
Self Employed Investor

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

4100.00

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

Transaction ID: 61026.C47674

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 16 Winding Lane

City State Zip Code
Greenwich CT 06831

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

Name of Employer N/A Occupation
N/A Retired

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: 61025.C47538

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Andrew Faville

Mailing Address 1020 Airpark Dr.

City State Zip Code
Sugar Grove IL 60554

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

Name of Employer Occupation
Falex Corp. President/CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

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

Transaction ID: 61027.C47767

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1624 Hunting Creek Dr.

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Motion Picture Assoc. Exec.

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

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

Transaction ID: 61102.C47816

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 421 Brierhill Rd.

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Relative Value Partners Investor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

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

Transaction ID: 61026.C47726

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 1240 Post Rd.

City Aurora State IL Zip Code 60506

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

Name of Employer Fermilab Occupation Scientist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 675.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47467

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 496 W. Andrew Rd.

City Springfield State IL Zip Code 62707

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

Name of Employer Self Employed Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47792

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 40W570 Stonecrest Dr.

City Elgin State IL Zip Code 60123

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

Name of Employer Sherman Hospital Occupation President & CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61026.C47687

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Michael Frazin

Mailing Address 2 W. St. Andrew Ln.

City Bannockburn State IL Zip Code 60015

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61026.C47704

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 31 Walnut Circle

City Aurora State IL Zip Code 60506

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

Name of Employer Self Employed Occupation Insurance broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1175.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47493

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 451 Orchard Ln.

City Highland Park State IL Zip Code 60035

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

Name of Employer Latham & Watkins Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: 61026.C47706

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
George Gilkerson

Mailing Address 4200 Commerce Ct.
Suite 300

City State Zip Code
Lisle IL 60532

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

Name of Employer Dykema Gossett Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47488

Amount of Each Receipt this Period
350.00

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

B. Full Name (Last, First, Middle Initial)
Sandra Goeken Miles

Mailing Address P. O. Box 160

City State Zip Code
Oswego IL 60543

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

Name of Employer Goeken Group of Co. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47733

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 39W673 Henry David Thoreau Place

City State Zip Code
Saint Charles IL 60175

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

Name of Employer Belmay Occupation Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1175.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47485

Amount of Each Receipt this Period
175.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2625.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
James Groat

Mailing Address 728 E. Church St.

City State Zip Code
Sandwich IL 60548

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

Name of Employer Self Employed Occupation
Self Employed Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: 61202.C47947

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 713 West Ln.

City State Zip Code
Geneva IL 60134

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

Name of Employer Self Employed Occupation
Self Employed Topographer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

3300.00

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

Transaction ID: 61026.C47679

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 120 S. Bennett

City State Zip Code
Geneva IL 60134

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

Name of Employer Self Employed Occupation
Self Employed Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47483

Amount of Each Receipt this Period
350.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Rosemarie Havranek

Mailing Address 1756 114th Ave. S.E.
Suite 110

City Bellevue State WA Zip Code 98004

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61025.C47604

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 930 Garfield Ave.

City Aurora State IL Zip Code 60506

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47728

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1502 Camden Ct., D-2

City Wheeling State IL Zip Code 60090

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

Name of Employer Mackie Consultants Occupation Assistant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61105.C47840

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
L.J. Hochberg

Mailing Address 275 N. Deere Park E.

City Highland Park State IL Zip Code 60035

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

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

Transaction ID: 61020.C47462

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
Mary Jo Hoffman

Mailing Address 5688 R.F.D.

City Long Grove State IL Zip Code 60047

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61026.C47707

Amount of Each Receipt this Period
 2100.00

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

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

Mailing Address 6208 North Willow Pond D.

City Fredericksburg State VA Zip Code 22407

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

Name of Employer Ryan, Phillips, Utrecht & McK. Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47798

Amount of Each Receipt this Period
 500.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
William Inglee

Mailing Address 3907 Woodley Drive

City State Zip Code
Alexandria VA 22309

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

Name of Employer Occupation
Lockheed Martin Vice Pres.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2006

Transaction ID: 61023.C47508

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 3198 Pond Mist Way

City State Zip Code
Oak Hill VA 20171

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

Name of Employer Occupation
Fierce, Isakowitz & Blalock Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 61102.C47814

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 3700 Ft. Worth Ave.

City State Zip Code
Alexandria VA 22304

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

Name of Employer Occupation
Society of Civil Engineers E.V.P

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2006

Transaction ID: 61020.C47449

Amount of Each Receipt this Period
525.00

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

SUBTOTAL of Receipts This Page (optional) ► **3525.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Deborah Jannotta

Mailing Address 1175 Whitebridge Hill

City State Zip Code
Northfield IL 60093

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61027.C47750

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Edgar D. Jannotta

Mailing Address 222 West Adams

City State Zip Code
Chicago IL 60606-5312

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

Name of Employer William Blair & Co. Occupation Invest. Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4100.00

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

Transaction ID: 61026.C47667

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 1522 Orchard Cir.

City State Zip Code
Naperville IL 60565

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

Name of Employer Motorola Occupation Director - Human Resources

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47791

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **4700.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

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

Mailing Address 4528 Macomb St. NW

City Washington State DC Zip Code 20016

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

Name of Employer Capitol Hill Group Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2006

Transaction ID: 61026.C47740

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 24480 Hwy. 20

City Prophetstown State IL Zip Code 61277

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47909

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 61 Maple, P. O. Box 281

City Sugar Grove State IL Zip Code 60554

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

Name of Employer Kane County Government Occupation Auditor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47874

Amount of Each Receipt this Period
175.00

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

SUBTOTAL of Receipts This Page (optional) ► 1375.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Daniel Keniry

Mailing Address 1852 Columbia Rd. NW
Apt. 103

City Washington State DC Zip Code 20009

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

Name of Employer TIAA-CREF Occupation VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61026.C47685

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 513 W Patey St

City Annawan State IL Zip Code 61234

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

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

Transaction ID: 61202.C47896

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 605 Upland Place

City Alexandria State VA Zip Code 22301

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

Name of Employer Bracewell Giuliani Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61102.C47818

Amount of Each Receipt this Period
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Larry Kugler

Mailing Address 234 Maple Hill Rd.

City State Zip Code
Glencoe IL 60022

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

Name of Employer Millard Group Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61026.C47708

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 188 Park Ave.

City State Zip Code
Glencoe IL 60022

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: 61026.C47709

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 333 Maryland Ave., NE

City State Zip Code
Washington DC 20002

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

Name of Employer Lundquist Nethercutt Grilles Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47739

Amount of Each Receipt this Period
1100.00

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

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 / 151
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
William C. Lane

Mailing Address 10017 Carpers Farm Ct.

City Vienna State VA Zip Code 22182

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

Name of Employer Caterpillar Inc. Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47796

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1250 Ridge Rd.

City Northbrook State IL Zip Code 60062

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

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

Transaction ID: 61026.C47710

Amount of Each Receipt this Period
750.00

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

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

Mailing Address 3280 Camp Creek Rd.

City Lynn Center State IL Zip Code 61262

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

Name of Employer Trinity Reg. Health Sys. Occupation Administrator

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1350.00

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

Transaction ID: 61026.C47684

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Sun Hee Lee

Mailing Address 104 Croydon Ct.

City State Zip Code
Oswego IL 60543

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

Name of Employer Occupation
Self Employed Dry Cleaner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47799

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1425 Rhode Island Ave., NW, #22

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Amgen Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: 61202.C47959

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 101 Constitution Ave., NW, Ste. 90

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation
c2group Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61102.C47835

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Ruth Ann Littlefield

Mailing Address 1-100 Farragut

City Lanark State IL Zip Code 61046

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

Name of Employer Sandwich Public Schools Occupation Teacher

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2006

Transaction ID: 61202.C47867

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 400 N. Capitol St., NW

City Washington State DC Zip Code 20001

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

Name of Employer Lundquist Nethercutt Grilles Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2006

Transaction ID: 61102.C47805

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 3018 South Glebe Rd.

City Arlington State VA Zip Code 22206

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

Name of Employer Verizon Occupation Fed. Govt. Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 31 / 2006

Transaction ID: 61101.C47782

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	2600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Andrew Maloney

Mailing Address 3020 Macomb Street, NW

City Washington State DC Zip Code 20008

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

Name of Employer Federalist Group Occupation Managing Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47788

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 303 Carl Dr.

City Bloomington State IL Zip Code 61704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

Transaction ID: 61102.C47807

Amount of Each Receipt this Period
 300.00

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

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

Mailing Address P.O. Box 31362

City Greenville State SC Zip Code 29608

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

Name of Employer Self Employed Occupation General Contractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47496

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1550.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Bret Maxwell

Mailing Address 4011 Brittany Ct.

City Northbrook State IL Zip Code 60062

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

Name of Employer MK Capital Occupation Venture Capital

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 61202.C47919

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 1403 Russell Rd.

City Alexandria State VA Zip Code 22301

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

Name of Employer Visionary Vehicles Occupation Vice President Govt. Relation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61202.C47954

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 209 Princess Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Verizon Occupation Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 61027.C47755

Amount of Each Receipt this Period
 250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Frank McMahan

Mailing Address 828 S. Bishop St.

City Chicago State IL Zip Code 60607-4022

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

Name of Employer McMahan Food Corp. Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47506

Amount of Each Receipt this Period
 2100.00

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

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

Mailing Address 828 S. Bishop St.

City Chicago State IL Zip Code 60607

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47507

Amount of Each Receipt this Period
 2100.00

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

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

Mailing Address 2310 Farmers Ct.

City Adamstown State MD Zip Code 21710

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

Name of Employer Verizon Occupation Fed. Govt. Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47780

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Michael Menis

Mailing Address 1731 Galloway Circle

City State Zip Code
Barrington IL 60010

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

Name of Employer
Self Employed

Occupation
Oral Surgeon

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47711

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address P. O. Box 160

City State Zip Code
Oswego IL 60543

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

Name of Employer
Goeken Group of Co.

Occupation
Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

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

Transaction ID: 61026.C47734

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 1409 Eustace Dr.

City State Zip Code
Dixon IL 61021

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

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

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

Transaction ID: 61202.C47861

Amount of Each Receipt this Period
100.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 3 W. Irving Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
Foley Hoag Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: 61102.C47817

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 7216 Countrywood Ct.

City State Zip Code
Springfield VA 22151

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

Name of Employer Occupation
Verizon Wireless Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61027.C47754

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 8890 Jules Ln.

City State Zip Code
Indianapolis IN 46278

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

Name of Employer Occupation
Self Employed Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47731

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mark Mullet

Mailing Address 1521 Brookside Rd.

City State Zip Code
Mc Lean VA 22101

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: 61102.C47827

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 215 N. Shabbona

City State Zip Code
Shabbona IL 60550

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61102.C47813

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1756 114th Ave.
Suite 110

City State Zip Code
Bellevue WA 98004

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

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

Transaction ID: 61025.C47606

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Timothy OBrien

Mailing Address 475 Regalia Dr.

City Inverness State IL Zip Code 60010

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 61026.C47688

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 85 Oakmont Rd.

City Highland Park State IL Zip Code 60035

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

Name of Employer Sidley Austin Brown & Wood Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 61026.C47713

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 1155 21 St., NW, Ste. 300

City Washington State DC Zip Code 20036

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

Name of Employer Williams & Jensen Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61105.C47850

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Joe Ourth

Mailing Address 207 Northwood Rd.

City State Zip Code
Riverside IL 60546

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

Name of Employer Occupation
Foley & Lardner Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: 61027.C47746

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 4151 Gulf Shore Blvd.
North, Unit 1801

City State Zip Code
Naples FL 34103

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

Name of Employer Occupation
N/A Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47470

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 4151 Gulf Shore Blvd.
North, Unit 1801

City State Zip Code
Naples FL 34103

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

Name of Employer Occupation
N/A Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47471

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4700.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Preston Padden

Mailing Address 5734 Pirates Cove Rd.

City Oxford State MD Zip Code 21654

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

Name of Employer Disney Occupation Government Relations

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47783

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 3320 North 34 Street

City Hollywood State FL Zip Code 33021

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61026.C47714

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address Illinois Hospital Association
1151 E. Warrenville Rd.

City Naperville State IL Zip Code 60563

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

Name of Employer Illinois Hospital Assoc. Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47772

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Janet Phillips

Mailing Address 13301 Manor Stone Drive

City State Zip Code
Germantown MD 20874

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47800

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Elise Finley Pickering

Mailing Address 2510-C Arlington Mill Dr.

City State Zip Code
Arlington VA 22206

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

Name of Employer Mehlman Vogel Castagnetti Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

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

Transaction ID: 61026.C47741

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 3615 Old Vernon Ct.

City State Zip Code
Alexandria VA 22309

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

Name of Employer Ryan, Phillips, Utrecht & McK. Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47801

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 2328 Champlain St., NW, #421

City Washington State DC Zip Code 20009

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

Name of Employer The Rhoads Group Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61202.C47956

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 116 Spring Ridge Dr.

City Bloomington State IL Zip Code 61704

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

Name of Employer Farnsworth Group Occupation Dir. Planning/Dev

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47465

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 5009 Woodland

City Western Springs State IL Zip Code 60558

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

Name of Employer Illinois Hospital Assoc. Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 61102.C47822

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Alexandra Ransburg

Mailing Address 509 E. High Point Rd.

City Peoria State IL Zip Code 61614

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61105.C47846

Amount of Each Receipt this Period
 2100.00

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

B. Full Name (Last, First, Middle Initial)
David P. Ransburg

Mailing Address 509 E. High Point Rd.

City Peoria State IL Zip Code 61614

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

Name of Employer L.R. Nelson Corp. Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3100.00

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

Transaction ID: 61105.C47845

Amount of Each Receipt this Period
 2100.00

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

C. Full Name (Last, First, Middle Initial)
Joseph J. Ritchie

Mailing Address 47W494 Jericho Rd.

City Big Rock State IL Zip Code 60511

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

Name of Employer Fox River Inv. Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47472

Amount of Each Receipt this Period
 2100.00

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

SUBTOTAL of Receipts This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Sharon Ritchie

Mailing Address 47W494 Jericho Rd.

City State Zip Code
Big Rock IL 60511

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61020.C47461

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 884 Bluff St.

City State Zip Code
Glencoe IL 60022

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

Name of Employer Kirkland & Ellis Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61026.C47715

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1531 Maria Ct.

City State Zip Code
Wheaton IL 60187

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61026.C47686

Amount of Each Receipt this Period
2100.00

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

SUBTOTAL of Receipts This Page (optional) ► **4700.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Earl Robinson

Mailing Address 3260 Walker Rd.

City Yorkville State IL Zip Code 60560

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: 61202.C47892

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address 1037 Laurelwood

City Carmel State IN Zip Code 46032

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

Name of Employer Golden Rule Ins. Co. Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47730

Amount of Each Receipt this Period
 2000.00

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

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

Mailing Address 139 11th St. NE

City Washington State DC Zip Code 20002

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

Name of Employer Mehlman Vogel Castagnetti Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61105.C47839

Amount of Each Receipt this Period
 1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Lester Rosenberg

Mailing Address 55 E. Superior St., 3rd Floor

City State Zip Code
Chicago IL 60611

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61026.C47717

Amount of Each Receipt this Period
500.00

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

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

Mailing Address P. O. Box 1044

City State Zip Code
Charleston IL 61920

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61202.C47958

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1751 W. Deihl

City State Zip Code
Naperville IL 60563

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

Name of Employer Goeken Group of Co. Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61102.C47806

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 16 Downing Circle

City State Zip Code
Bloomington IL 61704

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

Name of Employer State Farm Ins. Co. Occupation CEO & Chmn.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4100.00

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

Transaction ID: 61027.C47759

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 1425 Waverly Rd.

City State Zip Code
Highland Park IL 60035

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

Name of Employer Groszendor Mgmt. Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61026.C47718

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
James M. Sanger

Mailing Address 20 Clear Lake

City State Zip Code
Centralia IL 62801

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

Name of Employer St. Marys Hospital Occupation Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61202.C47922

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 215 Coventry Ct.

City State Zip Code
Elgin IL 60123

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

Name of Employer
Scheffow Rydell

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: 61025.C47511

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1722 S. Street, NW

City State Zip Code
Washington DC 20009

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

Name of Employer
Bracewell Giuliani

Occupation
Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61102.C47819

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 650 Ravine Rd.

City State Zip Code
Dundee IL 60118

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

Name of Employer
Seigles Home Improvement Cent

Occupation
Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: 61026.C47668

Amount of Each Receipt this Period
1000.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 350 W. Hubbard #350

City State Zip Code
Chicago IL 60610

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

Name of Employer Occupation
Self Employed Investor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

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

Transaction ID: 61026.C47719

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 314 Kentucky Ave., S.E.

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
Verizon Executive Dir/ Legal Affairs

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

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

Transaction ID: 61027.C47757

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 225 W. Wacker Dr., Ste. 2400

City State Zip Code
Chicago IL 60606

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

Name of Employer Occupation
Institutional Capital Securities Analyst

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1500.00

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

Transaction ID: 61026.C47720

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Daniel Sergi

Mailing Address 2223 Kings Ct.

City State Zip Code
Geneva IL 60134

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

Name of Employer Self Employed
Occupation Insurance broker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

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

Transaction ID: 61202.C47914

Amount of Each Receipt this Period
350.00

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

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

Mailing Address 8800 Bronx, Ste. 105

City State Zip Code
Skokie IL 60077

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

Name of Employer Self Employed
Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

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

Transaction ID: 61026.C47721

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 8270 E. Highpoint Rd..

City State Zip Code
Yorkville IL 60560

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

Name of Employer N/A
Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47778

Amount of Each Receipt this Period
700.00

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

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Shaun Sheehan

Mailing Address 609 S. Fairfax St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer
Tribune Broadcasting

Occupation
Govt. Afrs.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61202.C47945

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1401 K St., NW, Ste. 1000

City State Zip Code
Washington DC 20005

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

Name of Employer
The Washington Group

Occupation
Senior V.P.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61105.C47851

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 7440 Woodland Dr.

City State Zip Code
Indianapolis IN 46278

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

Name of Employer
Self Employed

Occupation
CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 6

Transaction ID: 61026.C47729

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
James H. Skogsbergh

Mailing Address 550 Elm St.

City Hinsdale State IL Zip Code 60521

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

Name of Employer Advocate Healthcare Occupation Pres. - CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61102.C47824

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
David J. Smith

Mailing Address 5540 111th Street

City Oak Lawn State IL Zip Code 60453

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

Name of Employer Bone & Joint Physicians Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

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

Transaction ID: 61026.C47689

Amount of Each Receipt this Period
 1750.00

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

C. Full Name (Last, First, Middle Initial)
Kehar S. Soodan

Mailing Address 100 N. LaSalle St., Ste. 1800

City Chicago State IL Zip Code 60602

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61102.C47821

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
James Sprayregen

Mailing Address 745 Greenwood Ave.

City State Zip Code
Glencoe IL 60022

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

Name of Employer Occupation
Kirkland & Ellis Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

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

Transaction ID: 61026.C47722

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2345 N. Lincoln Lake Drive

City State Zip Code
Coal City IL 60416

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

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

Transaction ID: 61026.C47681

Amount of Each Receipt this Period
2100.00

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

C. Full Name (Last, First, Middle Initial)
Dean V. Sweitzer

Mailing Address 2412 Clifton Ct.

City State Zip Code
Naperville IL 60565

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

Name of Employer Occupation
Royal Management Dir of Develop

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4000.00

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

Transaction ID: 61027.C47758

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 151
	<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)
Hastert for Congress Committee

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

Mailing Address 1704 Laguna Drive

City Richmond State TX Zip Code 77469

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: 61202.C47865

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address 2400 S. Culpeper St.

City Arlington State VA Zip Code 22206

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

Name of Employer Capitol Hill Group Occupation Govt. Afrs.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

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

Transaction ID: 61026.C47736

Amount of Each Receipt this Period
 2100.00

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

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

Mailing Address 14 Darwin Ave.

City Takoma Park State MD Zip Code 20912

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

Name of Employer PhRMA Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: 61202.C47935

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2700.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 80 / 151
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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Jack Victory

Mailing Address 300 F St., NE

City Washington State DC Zip Code 20002

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

Name of Employer Capitol Hill Group Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: 61026.C47737

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2103 W. Bartlett Rd.

City Bartlett State IL Zip Code 60103

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

Name of Employer Southwind Financial Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61101.C47775

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 23 Monarch Dr.

City Bloomington State IL Zip Code 61704

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

Name of Employer Heritage Enterprises Occupation Health care

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 6

Transaction ID: 61023.C47466

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Dan Webb

Mailing Address 35 W. Wacker Dr.
Suite 4200

City Chicago State IL Zip Code 60601

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

Name of Employer Winston & Strawn Occupation Lawyer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

Transaction ID: 61202.C47920

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 501 N. Clinton
Apt. 3201

City Chicago State IL Zip Code 60610

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: 61026.C47724

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 10S197 Springbrook Dr.

City Naperville State IL Zip Code 60565

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: 61202.C47859

Amount of Each Receipt this Period
100.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Walter White

Mailing Address 1607 Walleston Ct.

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation
Verizon Exec.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: 61027.C47753

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Wiley, Rein & Fielding Partnership

Mailing Address 1776 K St. NW, 10th Floor

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
N/A N/A

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

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

Transaction ID: 61105.C47852

Amount of Each Receipt this Period
1100.00

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

C. Full Name (Last, First, Middle Initial)
L. Kay Tatum

Mailing Address 1776 K St., NW

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation
Wiley, Rein & Fielding Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

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

Transaction ID: 61105.C47855

Amount of Each Receipt this Period
700.00

Memo
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Partnership->Wiley, Rein & Fielding Partnership

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 151
	<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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Darren Willcox

Mailing Address 10711 Falls Pointe Dr.

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
Dutko & Assoc. Lobbyist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

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

Transaction ID: 61105.C47842

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 19 Georgian Acres

City State Zip Code
Saint Louis MO 63131

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

100.00

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

Transaction ID: 61025.C47550

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 19 Georgian Acres

City State Zip Code
Saint Louis MO 63131

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

200.00

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

Transaction ID: 61026.C47698

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 151
	(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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
Karen Wright

Mailing Address 19 Georgian Acres

City State Zip Code
Saint Louis MO 63131

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

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

Transaction ID: 61026.C47697

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 14247 Sears Rd.

City State Zip Code
Plano IL 60545

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

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

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

Transaction ID: 61202.C47871

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	140400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 85 / 151	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial)
United Brotherhood of Carpenters

Mailing Address Attn: Accounting Dept., 10th Floor
101 Constitution Ave., NW

City State Zip Code
Washington DC 20001-

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2006

Transaction ID: 61105.C47847

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 151
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Valley Community Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 18 E. Wilson St.		Transaction ID: 61025.C47666	
City State Zip Code Batavia IL 60510-	Amount of Each Receipt this Period 329.77		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 16394.62		
NOTE: Interest			

Full Name (Last, First, Middle Initial) B. Valley Community Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 18 E. Wilson St.		Transaction ID: 61202.C47927	
City State Zip Code Batavia IL 60510-	Amount of Each Receipt this Period 481.62		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 16876.24		
NOTE: Interest			

Full Name (Last, First, Middle Initial) C. Valley Community Bank		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address 18 E. Wilson St.		Transaction ID: 61202.C47929	
City State Zip Code Batavia IL 60510-	Amount of Each Receipt this Period 115.35		
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 16991.59		
NOTE: Interest			

SUBTOTAL of Receipts This Page (optional) ▶	926.74
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 87 / 151	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Valley Community Bank	
Mailing Address 18 E. Wilson St.	
City Batavia	State IL
Zip Code 60510-	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 16881.95

Date of Receipt MM / DD / YYYY 11 / 21 / 2006
Transaction ID: 61202.C47930
Amount of Each Receipt this Period -109.64
Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
NOTE: Early withdrawal penalty

SUBTOTAL of Receipts This Page (optional)	-109.64
TOTAL This Period (last page this line number only)	817.10

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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Association for Individual Development		Transaction ID: 61202.E19980 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 309 West New Indian Trail Ct.		Amount of Each Disbursement this Period 160.00
City Aurora State IL Zip Code 60506-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE CLEANING		OFFICE CLEANING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express Merchant Services		Transaction ID: 61202.E20114 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address P. O. Box 53852		Amount of Each Disbursement this Period 2103.97
City Phoenix State AZ Zip Code 85072-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CREDIT CARD SERVICE CHARGE		CREDIT CARD SERVICE CHARGE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Batavia Postmaster		Transaction ID: 61101.E19940 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 500 N. Randall Rd.		Amount of Each Disbursement this Period 40.00
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement BOX RENTAL FEE		BOX RENTAL FEE
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2303.97
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. BGowan Companies		Transaction ID: 61202.E20097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 1717 Woodstead Ct., Ste. 107		Amount of Each Disbursement this Period 3719.18
City The Woodlands State TX Zip Code 77380-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DIRECT MAIL		Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. BGowan Companies		Transaction ID: 61202.E20098 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address 1717 Woodstead Ct., Ste. 107		Amount of Each Disbursement this Period 1834.21
City The Woodlands State TX Zip Code 77380-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL: SEE BELOW		Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT FOR TRAVEL: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Avis Rent-a-Car		Transaction ID: 61202.E20100 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6
Mailing Address OHare Aiport		Amount of Each Disbursement this Period 283.55
City Chicago State IL Zip Code 60614-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	5553.39
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Continental Airlines		Transaction ID: 61202.E20103 Date of Disbursement 11 / 14 / 2006	
Mailing Address 1600 Smith St.		Amount of Each Disbursement this Period 517.10	
City Houston State TX Zip Code 77002-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Hyatt Hotel - Lisle		Transaction ID: 61202.E20101 Date of Disbursement 11 / 14 / 2006	
Mailing Address 1400 Corporetum Dr.		Amount of Each Disbursement this Period 370.40	
City Lisle State IL Zip Code 60532-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hyatt Hotel - Schaumburg		Transaction ID: 61202.E20102 Date of Disbursement 11 / 14 / 2006	
Mailing Address 1800 E. Golf Rd.		Amount of Each Disbursement this Period 246.64	
City Schaumburg State IL Zip Code 60173-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Joseph M. Boland		Transaction ID: 61202.E20127 Date of Disbursement 11 / 09 / 2006	
Mailing Address 2448 Tunlaw Rd., NW		Amount of Each Disbursement this Period 746.14	
City Washington State DC Zip Code 20007-	Purpose of Disbursement PAYMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	PAYMENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph M. Boland		Transaction ID: 61202.E20128 Date of Disbursement 11 / 24 / 2006	
Mailing Address 2448 Tunlaw Rd., NW		Amount of Each Disbursement this Period 746.14	
City Washington State DC Zip Code 20007-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bolingbrook Golf Club		Transaction ID: 61202.E19968 Date of Disbursement 11 / 20 / 2006	
Mailing Address 2001 Rodeo Dr.		Amount of Each Disbursement this Period 4814.20	
City Bolingbrook State IL Zip Code 60490-	Purpose of Disbursement FUNDRAISING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	FUNDRAISING EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	6306.48
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Capitol Vision		Transaction ID: 61023.E19854 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 4742 N. 24th, Suite 405		Amount of Each Disbursement this Period 1350.00
City Phoenix State AZ Zip Code 85016-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING EXPENSE	Candidate Name	FUNDRAISING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Challenge Properties		Transaction ID: 61020.E19717 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 525 N. River St., Ste. 200		Amount of Each Disbursement this Period 1750.00
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT FOR CAMPAIGN OFFICE	Candidate Name	RENT FOR CAMPAIGN OFFICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Challenge Properties		Transaction ID: 61020.E19718 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6
Mailing Address 525 N. River St., Ste. 200		Amount of Each Disbursement this Period 100.00
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT FOR CAMPAIGN STORAGE	Candidate Name	RENT FOR CAMPAIGN STORAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3200.00
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Chase Cardmember Services		Transaction ID: 61202.E20099 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address P. O. Box 15153		Amount of Each Disbursement this Period 18401.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Wilmington State DE Zip Code 19886-	SEE BELOW	
Purpose of Disbursement SEE BELOW Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ace Hardware		Transaction ID: 61202.E20083 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 1901 W. Randall Rd.		Amount of Each Disbursement this Period 9.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Batavia State IL Zip Code 60510-	[MEMO ITEM] MEMO: OFFICE SUPPLIES	
Purpose of Disbursement OFFICE SUPPLIES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Alpha Graphics		Transaction ID: 61202.E20042 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 2740 E. Main St.		Amount of Each Disbursement this Period 1064.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City St. Charles State IL Zip Code 60174-	[MEMO ITEM] MEMO: PRINTING EXPENSE	
Purpose of Disbursement PRINTING EXPENSE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	18401.81
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: 61202.E20025 Date of Disbursement 11 / 13 / 2006	
Mailing Address P. O. Box 619612		Amount of Each Disbursement this Period 280.30	
City Dallas State TX Zip Code 75261-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. American Airlines		Transaction ID: 61202.E20028 Date of Disbursement 11 / 13 / 2006	
Mailing Address P. O. Box 619612		Amount of Each Disbursement this Period 25.00	
City Dallas State TX Zip Code 75261-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. American Airlines		Transaction ID: 61202.E20026 Date of Disbursement 11 / 13 / 2006	
Mailing Address P. O. Box 619612		Amount of Each Disbursement this Period 25.00	
City Dallas State TX Zip Code 75261-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. American Airlines		Transaction ID: 61202.E20027 Date of Disbursement 11 / 13 / 2006	
Mailing Address P. O. Box 619612		Amount of Each Disbursement this Period 714.30	
City Dallas State TX Zip Code 75261-	Purpose of Disbursement TRAVEL EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) B. Binnys		Transaction ID: 61202.E20089 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1950 Lincoln Hwy.		Amount of Each Disbursement this Period 1674.90	
City Saint Charles State IL Zip Code 60174-	Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE	

Full Name (Last, First, Middle Initial) C. Chicago Hilton		Transaction ID: 61202.E20011 Date of Disbursement 11 / 13 / 2006	
Mailing Address 720 S. Michigan Ave.		Amount of Each Disbursement this Period 4732.37	
City Chicago State IL Zip Code 60605-	Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE	

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

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

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Chicago Hilton		Transaction ID: 61202.E20095 Date of Disbursement 11 / 13 / 2006
Mailing Address 720 S. Michigan Ave.		Amount of Each Disbursement this Period 8.71
City Chicago State IL Zip Code 60605-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Colonial Restaurants		Transaction ID: 61202.E19991 Date of Disbursement 11 / 13 / 2006
Mailing Address 1961 W. Galena Blvd.		Amount of Each Disbursement this Period 28.63
City Aurora State IL Zip Code 60506-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Daily Herald		Transaction ID: 61202.E20052 Date of Disbursement 11 / 13 / 2006
Mailing Address P. O. Box 280 155 E. Algonquin Rd.		Amount of Each Disbursement this Period 150.00
City Arlington Heights State IL Zip Code 60005-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ADVERTISING	Candidate Name	[MEMO ITEM] MEMO: ADVERTISING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. El Taco Grande		Transaction ID: 61202.E20004 Date of Disbursement 11 / 13 / 2006	
Mailing Address 6 N. River St.		Amount of Each Disbursement this Period 56.76	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEETING EXPENSE	

Full Name (Last, First, Middle Initial) B. Elephant & Castle		Transaction ID: 61202.E20008 Date of Disbursement 11 / 13 / 2006	
Mailing Address 160 E. Huron		Amount of Each Disbursement this Period 83.00	
City Chicago State IL Zip Code 60611-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEETING EXPENSE	

Full Name (Last, First, Middle Initial) C. Elephant & Castle		Transaction ID: 61202.E20009 Date of Disbursement 11 / 13 / 2006	
Mailing Address 160 E. Huron		Amount of Each Disbursement this Period 148.89	
City Chicago State IL Zip Code 60611-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEETING EXPENSE	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Erie Cafe		Transaction ID: 61202.E19992 Date of Disbursement 11 / 13 / 2006	
Mailing Address 536 West Erie		Amount of Each Disbursement this Period 607.51	
City Chicago State IL Zip Code 60610-	Purpose of Disbursement MEETING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEETING EXPENSE	

Full Name (Last, First, Middle Initial) B. FedEx Kinkos		Transaction ID: 61202.E20078 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1330 Orchard Rd.		Amount of Each Disbursement this Period 218.13	
City Aurora State IL Zip Code 60506-	Purpose of Disbursement OFFICE EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: OFFICE EXPENSE	

Full Name (Last, First, Middle Initial) C. Hampton Inn & Suites		Transaction ID: 61202.E19988 Date of Disbursement 11 / 13 / 2006	
Mailing Address 2423 Bushwood Dr.		Amount of Each Disbursement this Period 140.61	
City Aurora State IL Zip Code 60505-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Hertz Rent-a-Car		Transaction ID: 61202.E20033 Date of Disbursement 11 / 13 / 2006	
Mailing Address OHare Airport		Amount of Each Disbursement this Period 239.80	
City Chicago State IL Zip Code 60611-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) B. Hilton Garden Inn		Transaction ID: 61202.E20035 Date of Disbursement 11 / 13 / 2006	
Mailing Address 10 E. Grand Ave.		Amount of Each Disbursement this Period 893.37	
City Chicago State IL Zip Code 60611-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) C. Hunan Dynasty		Transaction ID: 61202.E19987 Date of Disbursement 11 / 13 / 2006	
Mailing Address 215 Penn. Ave., SE		Amount of Each Disbursement this Period 48.00	
City Washington State DC Zip Code 20003-	Purpose of Disbursement MEETING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: MEETING EXPENSE	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Hyatt Hotels		Transaction ID: 61202.E20040 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1000 H Street NW		Amount of Each Disbursement this Period 273.66	
City Washington State DC Zip Code 20001-	Purpose of Disbursement TRAVEL EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) B. Hyatt Hotels		Transaction ID: 61202.E20041 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1000 H Street NW		Amount of Each Disbursement this Period 3644.11	
City Washington State DC Zip Code 20001-	Purpose of Disbursement TRAVEL EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE	

Full Name (Last, First, Middle Initial) C. JWA - John Wayne Airport Parking		Transaction ID: 61202.E20034 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1515 S. Coast Dr.		Amount of Each Disbursement this Period 85.00	
City Costa Mesa State CA Zip Code 92626-	Purpose of Disbursement TRAVEL EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Liturgical Publications		Transaction ID: 61207.E20147 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address P. O. Box 51087		Amount of Each Disbursement this Period -150.00
City New Berlin State WI Zip Code 53151-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CREDIT	
Purpose of Disbursement CREDIT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Liturgical Publications		Transaction ID: 61207.E20145 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address P. O. Box 51087		Amount of Each Disbursement this Period -300.00
City New Berlin State WI Zip Code 53151-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CREDIT	
Purpose of Disbursement CREDIT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Liturgical Publications		Transaction ID: 61207.E20146 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address P. O. Box 51087		Amount of Each Disbursement this Period -50.00
City New Berlin State WI Zip Code 53151-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CREDIT	
Purpose of Disbursement CREDIT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Moveable Feast		Transaction ID: 61202.E20077 Date of Disbursement 11 / 13 / 2006
Mailing Address 321 Franklin St.		Amount of Each Disbursement this Period 7.24
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. OBriens Pub		Transaction ID: 61202.E20050 Date of Disbursement 11 / 13 / 2006
Mailing Address 12 N. River St.		Amount of Each Disbursement this Period 35.35
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. OHare Hilton		Transaction ID: 61202.E20037 Date of Disbursement 11 / 13 / 2006
Mailing Address P.O. Box 66414		Amount of Each Disbursement this Period 239.37
City Chicago State IL Zip Code 60666-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL EXPENSE	Candidate Name	[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 61202.E20091 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 1964 W. Fabyan Parkway		Amount of Each Disbursement this Period 268.72
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Office Max		Transaction ID: 61202.E20048 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 321 N. Randall Rd.		Amount of Each Disbursement this Period 218.79
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Office Max		Transaction ID: 61202.E20081 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 321 N. Randall Rd.		Amount of Each Disbursement this Period 35.07
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. OnStar		Transaction ID: 61202.E20010 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address 1400 Stephenson Hwy.		Amount of Each Disbursement this Period 16.95	
City Troy State MI Zip Code 48083-	Purpose of Disbursement CELLULAR PHONE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: CELLULAR PHONE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. One East Wilson/Jonsey Ent.		Transaction ID: 61202.E19995 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address 1 E. Wilson		Amount of Each Disbursement this Period 43.00	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: MEETING EXPENSE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. One East Wilson/Jonsey Ent.		Transaction ID: 61202.E19994 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address 1 E. Wilson		Amount of Each Disbursement this Period 56.68	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: MEETING EXPENSE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. One East Wilson/Jonsey Ent.		Transaction ID: 61202.E19993 Date of Disbursement 11 / 13 / 2006	
Mailing Address 1 E. Wilson		Amount of Each Disbursement this Period 49.00	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: MEETING EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Panera Bread Co.		Transaction ID: 61202.E20055 Date of Disbursement 11 / 13 / 2006	
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 34.77	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: MEETING EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Panera Bread Co.		Transaction ID: 61202.E20063 Date of Disbursement 11 / 13 / 2006	
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 3.62	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	[MEMO ITEM] MEMO: MEETING EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Panera Bread Co.		Transaction ID: 61202.E20064 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 45.75
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Panera Bread Co.		Transaction ID: 61202.E20065 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 39.03
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Panera Bread Co.		Transaction ID: 61202.E20062 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 13.14
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Panera Bread Co.		Transaction ID: 61202.E20066 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address 154 W. Wilson St.		Amount of Each Disbursement this Period 10.79	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: MEETING EXPENSE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Panera Bread Co.		Transaction ID: 61202.E20067 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address Rt. 34		Amount of Each Disbursement this Period 6.56	
City Yorkville State IL Zip Code 60560-	Purpose of Disbursement MEETING EXPENSE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: MEETING EXPENSE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Red Star Tavern		Transaction ID: 61202.E20006 Date of Disbursement MM / DD / YYYY 11 / 13 / 2006	
Mailing Address 1602 Commons Dr.		Amount of Each Disbursement this Period 54.00	
City Geneva State IL Zip Code 60134-	Purpose of Disbursement MEETING EXPENSE Candidate Name Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		[MEMO ITEM] MEMO: MEETING EXPENSE	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. The Office Works		Transaction ID: 61202.E20045 Date of Disbursement 11 / 13 / 2006	
Mailing Address P. O. Box 173		Amount of Each Disbursement this Period 42.65	
City Plano	State IL	Zip Code 60545-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	
Candidate Name		[MEMO ITEM] MEMO: OFFICE SUPPLIES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: 61202.E20044 Date of Disbursement 11 / 13 / 2006	
Mailing Address On-line Ticketing		Amount of Each Disbursement this Period 118.60	
City Sterling	State VA	Zip Code 20164-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	
Candidate Name		[MEMO ITEM] MEMO: TRAVEL EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Venice Tavern		Transaction ID: 61202.E20000 Date of Disbursement 11 / 13 / 2006	
Mailing Address 31 N. River		Amount of Each Disbursement this Period 89.79	
City Batavia	State IL	Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement MEETING EXPENSE		Category/ Type	
Candidate Name		[MEMO ITEM] MEMO: MEETING EXPENSE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Venice Tavern		Transaction ID: 61202.E19999 Date of Disbursement 11 / 13 / 2006	
Mailing Address 31 N. River		Amount of Each Disbursement this Period 25.58	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO: MEETING EXPENSE

Full Name (Last, First, Middle Initial) B. Venice Tavern		Transaction ID: 61202.E19996 Date of Disbursement 11 / 13 / 2006	
Mailing Address 31 N. River		Amount of Each Disbursement this Period 32.83	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO: MEETING EXPENSE

Full Name (Last, First, Middle Initial) C. Venice Tavern		Transaction ID: 61202.E20002 Date of Disbursement 11 / 13 / 2006	
Mailing Address 31 N. River		Amount of Each Disbursement this Period 31.35	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement MEETING EXPENSE Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
MEMO: MEETING EXPENSE

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Venice Tavern		Transaction ID: 61202.E20001 Date of Disbursement 11 / 13 / 2006
Mailing Address 31 N. River		Amount of Each Disbursement this Period 47.78
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Venice Tavern		Transaction ID: 61202.E19998 Date of Disbursement 11 / 13 / 2006
Mailing Address 31 N. River		Amount of Each Disbursement this Period 27.58
City Batavia State IL Zip Code 60510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	[MEMO ITEM] MEMO: MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. VictoryStore.com		Transaction ID: 61202.E20087 Date of Disbursement 11 / 13 / 2006
Mailing Address 5200 SW 30th St., Ste. 7		Amount of Each Disbursement this Period 910.00
City Davenport State IA Zip Code 52802-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement YARD SIGNS	Candidate Name	[MEMO ITEM] MEMO: YARD SIGNS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**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)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Yellow Cab Co.		Transaction ID: 61202.E20029 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 6
Mailing Address 1636 Bladensberg NE		Amount of Each Disbursement this Period 42.85
City Washington State DC Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL EXPENSE Candidate Name	Category/Type	[MEMO ITEM] MEMO: TRAVEL EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: 61202.E20108 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address P. O. Box 6428		Amount of Each Disbursement this Period 566.56
City Carol Stream State IL Zip Code 60197-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CELLULAR PHONE Candidate Name	Category/Type	CELLULAR PHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jennifer Cloyd		Transaction ID: 61027.E19923 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6
Mailing Address 0S965 W. Burnham Ln.		Amount of Each Disbursement this Period 2800.00
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3366.56
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Jennifer Cloyd		Transaction ID: 61202.E20135 Date of Disbursement 11 / 24 / 2006	
Mailing Address 0S965 W. Burnham Ln.		Amount of Each Disbursement this Period 2800.00	
City Geneva State IL Zip Code 60134-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Connolly		Transaction ID: 61202.E20141 Date of Disbursement 11 / 09 / 2006	
Mailing Address 2812 Cameron Rd.		Amount of Each Disbursement this Period 1000.00	
City Falls Church State VA Zip Code 22042-	Purpose of Disbursement COMMUNICATIONS CONSULTANT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	COMMUNICATIONS CONSULTANT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DC Dept. of Empl. Services		Transaction ID: 61101.E19935 Date of Disbursement 10 / 31 / 2006	
Mailing Address P. O. Box 96664		Amount of Each Disbursement this Period 36.25	
City Washington State DC Zip Code 20090-6664	Purpose of Disbursement EMPLOYMENT TAXES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	EMPLOYMENT TAXES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3836.25
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Terry DesCoteaux		Transaction ID: 61027.E19925 Date of Disbursement 10 / 27 / 2006	
Mailing Address 101 Howard St.		Amount of Each Disbursement this Period 3433.48	
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement SALARY Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ SALARY		

Full Name (Last, First, Middle Initial) B. Terry DesCoteaux		Transaction ID: 61217.E20221 Date of Disbursement 11 / 24 / 2006	
Mailing Address 101 Howard St.		Amount of Each Disbursement this Period 3433.48	
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement SALARY Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ SALARY		

Full Name (Last, First, Middle Initial) C. DirecTV		Transaction ID: 61202.E20106 Date of Disbursement 11 / 01 / 2006	
Mailing Address P.O. Box 9001069		Amount of Each Disbursement this Period 63.96	
City Louisville State KY Zip Code 40290-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement CABLE SERVICE Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CABLE SERVICE		

SUBTOTAL of Disbursements This Page (optional) ▶	6930.92
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Brian Dolan		Transaction ID: 61202.E19954 Date of Disbursement 11 / 14 / 2006	
Mailing Address 1111 Crestview		Amount of Each Disbursement this Period 209.02	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement REIMBURSEMENT FOR TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT FOR TRAVEL	

Full Name (Last, First, Middle Initial) B. Brian Dolan		Transaction ID: 61202.E19953 Date of Disbursement 11 / 14 / 2006	
Mailing Address 1111 Crestview		Amount of Each Disbursement this Period 1000.00	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Extended Data Solutions		Transaction ID: 61026.E19921 Date of Disbursement 10 / 26 / 2006	
Mailing Address 500 N. Michigan Ave., Ste. 300		Amount of Each Disbursement this Period 48656.56	
City Chicago State IL Zip Code 60611-3775	Purpose of Disbursement DIRECT MAIL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL	

SUBTOTAL of Disbursements This Page (optional) ►

49865.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Extended Data Solutions		Transaction ID: 61101.E19932 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 500 N. Michigan Ave., Ste. 300		Amount of Each Disbursement this Period 41433.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chicago State IL Zip Code 60611-3775	Category/Type <input type="checkbox"/> DIRECT MAIL	
Purpose of Disbursement DIRECT MAIL	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT MAIL
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. First Data Merchant Services		Transaction ID: 61202.E20113 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address 1 Western Maryland Pkwy.		Amount of Each Disbursement this Period 871.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Hagerstown State MD Zip Code 21740-	Category/Type <input type="checkbox"/> CREDIT CARD SERVICE CHARGE	
Purpose of Disbursement CREDIT CARD SERVICE CHARGE	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD SERVICE CHARGE
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. David W. From		Transaction ID: 61202.E19951 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 980 Rosewood Dr.		Amount of Each Disbursement this Period 8113.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City West Chicago State IL Zip Code 60185-	Category/Type <input type="checkbox"/> SALARY	
Purpose of Disbursement SALARY	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	50418.73
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s)
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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. David W. From		Transaction ID: 61202.E20140 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6
Mailing Address 980 Rosewood Dr.		Amount of Each Disbursement this Period 8374.08
City West Chicago State IL Zip Code 60185-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Adam Fromm		Transaction ID: 61202.E20136 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6
Mailing Address 1600 S. Eads St., 228-N		Amount of Each Disbursement this Period 364.14
City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Adam Fromm		Transaction ID: 61202.E20137 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6
Mailing Address 1600 S. Eads St., 228-N		Amount of Each Disbursement this Period 364.14
City Arlington State VA Zip Code 22202-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9102.36
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)
Hastert for Congress Committee

<p>A. GMAC</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P.O. Box 9001951</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement VEHICLE LEASE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 61101.E19927</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="714.68"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>VEHICLE LEASE</p>
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<p>B. GMAC</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P.O. Box 9001951</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement VEHICLE LEASE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 61202.E20107</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="707.68"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>VEHICLE LEASE</p>
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<p>C. Brad Goodman</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 964 Cooper Ct.</p> <p>City Buffalo Grove State IL Zip Code 60089-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: 61027.E19924</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2906.42"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SALARY</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4328.78"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Brad Goodman		Transaction ID: 61202.E20142 Date of Disbursement 11 / 24 / 2006	
Mailing Address 964 Cooper Ct.		Amount of Each Disbursement this Period 2906.42	
City Buffalo Grove State IL Zip Code 60089-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) B. April Green		Transaction ID: 61202.E19966 Date of Disbursement 11 / 15 / 2006	
Mailing Address P. O. Box 858		Amount of Each Disbursement this Period 355.35	
City Streator State IL Zip Code 61364-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Brad Hahn		Transaction ID: 61202.E20131 Date of Disbursement 11 / 09 / 2006	
Mailing Address 701 Elder Ln.		Amount of Each Disbursement this Period 656.88	
City Deerfield State IL Zip Code 60015-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	3918.65
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Brad Hahn		Transaction ID: 61202.E20132 Date of Disbursement 11 / 24 / 2006	
Mailing Address 701 Elder Ln.		Amount of Each Disbursement this Period 656.88	
City Deerfield State IL Zip Code 60015-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) B. Bryan Harbin		Transaction ID: 61202.E19964 Date of Disbursement 11 / 15 / 2006	
Mailing Address P. O. Box 51		Amount of Each Disbursement this Period 1179.00	
City Bristol State IL Zip Code 60512-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Bryan Harbin		Transaction ID: 61202.E19970 Date of Disbursement 11 / 24 / 2006	
Mailing Address P. O. Box 51		Amount of Each Disbursement this Period 1179.00	
City Bristol State IL Zip Code 60512-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	3014.88
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Jeff Herinckx		Transaction ID: 61202.E20133 Date of Disbursement 11 / 09 / 2006	
Mailing Address 428 3rd St., NE, Apt. 301		Amount of Each Disbursement this Period 307.83	
City Washington State DC Zip Code 20002-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeff Herinckx		Transaction ID: 61202.E20134 Date of Disbursement 11 / 24 / 2006	
Mailing Address 428 3rd St., NE, Apt. 301		Amount of Each Disbursement this Period 307.83	
City Washington State DC Zip Code 20002-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hoon Designs		Transaction ID: 61202.E19960 Date of Disbursement 11 / 15 / 2006	
Mailing Address 2800 Shirlington Rd., Ste 920		Amount of Each Disbursement this Period 550.00	
City Arlington State VA Zip Code 22206-	Purpose of Disbursement PAYMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	PAYMENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

1165.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Hotel Baker		Transaction ID: 61105.E19946 Date of Disbursement 11 / 03 / 2006
Mailing Address 1 Main Street		Amount of Each Disbursement this Period 31530.00
City St. Charles State IL Zip Code 60174-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING EXPENSE	Candidate Name	FUNDRAISING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William Hughes		Transaction ID: 61202.E20138 Date of Disbursement 11 / 09 / 2006
Mailing Address 8400 Fenway Rd.		Amount of Each Disbursement this Period 1032.50
City Bethesda State MD Zip Code 20817-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POLITICAL CONSULTANT	Candidate Name	POLITICAL CONSULTANT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. William Hughes		Transaction ID: 61202.E20139 Date of Disbursement 11 / 24 / 2006
Mailing Address 8400 Fenway Rd.		Amount of Each Disbursement this Period 1032.50
City Bethesda State MD Zip Code 20817-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POLITICAL CONSULTANT	Candidate Name	POLITICAL CONSULTANT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	33595.00
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. IL Citizens for Life		Transaction ID: 61202.E19982 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address P. O. Box 843		Amount of Each Disbursement this Period 225.00	
City Oak Park	State IL	Zip Code 60302-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement ADVERTISING		Category/ Type	
Candidate Name		ADVERTISING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. IL Department of Revenue		Transaction ID: 61101.E19933 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address P. O. Box 88294		Amount of Each Disbursement this Period 312.00	
City Springfield	State IL	Zip Code 62794-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement PAYROLL TAXES		Category/ Type	
Candidate Name		PAYROLL TAXES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. IL Department of Revenue		Transaction ID: 61202.E19956 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6	
Mailing Address P. O. Box 88294		Amount of Each Disbursement this Period 991.11	
City Springfield	State IL	Zip Code 62794-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement PAYROLL TAXES		Category/ Type	
Candidate Name		PAYROLL TAXES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1528.11
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. IL Department of Revenue		Transaction ID: 61202.E19974 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address P. O. Box 88294		Amount of Each Disbursement this Period 1006.40	
City Springfield State IL Zip Code 62794-	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES	

Full Name (Last, First, Middle Initial) B. IL Dept. of Employment Security		Transaction ID: 61101.E19934 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address P.O. Box 803414		Amount of Each Disbursement this Period 163.26	
City Chicago State IL Zip Code 60680-3412	Purpose of Disbursement EMPLOYMENT TAXES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	EMPLOYMENT TAXES	

Full Name (Last, First, Middle Initial) C. Tom Jarman		Transaction ID: 61202.E19965 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address P. O. Box PERC		Amount of Each Disbursement this Period 1500.00	
City North Manchester State IN Zip Code 46962-	Purpose of Disbursement POLITICAL CONSULTANT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLITICAL CONSULTANT	

SUBTOTAL of Disbursements This Page (optional) ▶	2669.66
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Tom Jarman		Transaction ID: 61202.E19971 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6	
Mailing Address P. O. Box PERC		Amount of Each Disbursement this Period 1500.00	
City North Manchester State IN Zip Code 46962-	Purpose of Disbursement POLITICAL CONSULTANT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLITICAL CONSULTANT	

Full Name (Last, First, Middle Initial) B. Barret Kedzior		Transaction ID: 61101.E19928 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 2744 1/2 N. Hampden Court Apt. 4 L		Amount of Each Disbursement this Period 1550.75	
City Chicago State IL Zip Code 60614-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Barret Kedzior		Transaction ID: 61202.E20143 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6	
Mailing Address 2744 1/2 N. Hampden Court Apt. 4 L		Amount of Each Disbursement this Period 1550.75	
City Chicago State IL Zip Code 60614-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	4601.50
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) Kelmscott Press Mailing Address P. O. Box 1909 City Aurora State IL Zip Code 60507- Purpose of Disbursement PRINTING EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 61202.E19952 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 5917.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PRINTING EXPENSE
B. Full Name (Last, First, Middle Initial) Tom Kneebone Mailing Address Box 885 City Huntley State IL Zip Code 60142- Purpose of Disbursement COPIES OF NEWS TAPES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 61025.E19902 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COPIES OF NEWS TAPES
C. Full Name (Last, First, Middle Initial) Lisa Wagner & Co. Mailing Address P. O. Box 446 City Aurora State IL Zip Code 60510- Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 61202.E19950 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6 Amount of Each Disbursement this Period 11000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ►

20417.95

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Matt Ferguson Photography		Transaction ID: 61202.E19985 Date of Disbursement 11 / 21 / 2006	
Mailing Address 222 S. Morgan		Amount of Each Disbursement this Period 5918.00	
City Chicago State IL Zip Code 60607-	Purpose of Disbursement FUNDRAISING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING EXPENSE	

Full Name (Last, First, Middle Initial) B. John E. McGovern, III		Transaction ID: 61202.E20123 Date of Disbursement 11 / 09 / 2006	
Mailing Address 2014 N. Sheffield, B2		Amount of Each Disbursement this Period 2500.00	
City Chicago State IL Zip Code 60614-	Purpose of Disbursement COMMUNICATIONS CONSULTANT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMMUNICATIONS CONSULTANT	

Full Name (Last, First, Middle Initial) C. John E. McGovern, III		Transaction ID: 61202.E20124 Date of Disbursement 11 / 24 / 2006	
Mailing Address 2014 N. Sheffield, B2		Amount of Each Disbursement this Period 2500.00	
City Chicago State IL Zip Code 60614-	Purpose of Disbursement COMMUNICATIONS CONSULTANT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMMUNICATIONS CONSULTANT	

SUBTOTAL of Disbursements This Page (optional) ▶	10918.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. MCI Residential Service		Transaction ID: 61202.E20105 Date of Disbursement 10 / 26 / 2006
Mailing Address P.O. Box 17890		Amount of Each Disbursement this Period 148.08
City Denver State CO Zip Code 80217-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE	Candidate Name	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MCI Residential Service		Transaction ID: 61202.E20111 Date of Disbursement 11 / 24 / 2006
Mailing Address P.O. Box 17890		Amount of Each Disbursement this Period 176.65
City Denver State CO Zip Code 80217-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE	Candidate Name	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. McKenna Long & Aldridge		Transaction ID: 61202.E19981 Date of Disbursement 11 / 21 / 2006
Mailing Address 303 Peachtree St., NE, Ste. 5300		Amount of Each Disbursement this Period 11808.36
City Atlanta State GA Zip Code 30308-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement LEGAL SERVICE	Candidate Name	LEGAL SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12133.09
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. McLaughlin & Assoc.		Transaction ID: 61023.E19853 Date of Disbursement 10 / 19 / 2006	
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 8670.00	
City Blauvelt State NY Zip Code 10913-	Purpose of Disbursement POLLING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLLING	

Full Name (Last, First, Middle Initial) B. McLaughlin & Assoc.		Transaction ID: 61101.E19930 Date of Disbursement 10 / 31 / 2006	
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 23346.71	
City Blauvelt State NY Zip Code 10913-	Purpose of Disbursement POLLING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLLING	

Full Name (Last, First, Middle Initial) C. McLaughlin & Assoc.		Transaction ID: 61101.E19942 Date of Disbursement 11 / 01 / 2006	
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 16500.00	
City Blauvelt State NY Zip Code 10913-	Purpose of Disbursement POLLING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POLLING	

SUBTOTAL of Disbursements This Page (optional) ▶	48516.71
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)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Moveable Feast		Transaction ID: 61202.E19949 Date of Disbursement 11 / 07 / 2006
Mailing Address 321 Franklin St.		Amount of Each Disbursement this Period 1709.86
City Geneva State IL Zip Code 60134-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEETING EXPENSE	Candidate Name	MEETING EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Andrew Nelms		Transaction ID: 61202.E19976 Date of Disbursement 11 / 09 / 2006
Mailing Address 1092 Aspen Ct. #1		Amount of Each Disbursement this Period 418.83
City Dekalb State IL Zip Code 60115-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY	Candidate Name	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Andrew Nelms		Transaction ID: 61202.E19978 Date of Disbursement 11 / 21 / 2006
Mailing Address 1092 Aspen Ct. #1		Amount of Each Disbursement this Period 26.00
City Dekalb State IL Zip Code 60115-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL	Candidate Name	REIMBURSEMENT FOR TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2154.69
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Andrew Nelms		Transaction ID: 61202.E19977 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6
Mailing Address 1092 Aspen Ct. #1		Amount of Each Disbursement this Period 418.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Dekalb State IL Zip Code 60115-	SALARY <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Nelson Enterprises		Transaction ID: 61105.E19947 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 1 Broadcast Center		Amount of Each Disbursement this Period 390.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Plano State IL Zip Code 60545-	ADVERTISING <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ADVERTISING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Novatoo		Transaction ID: 61202.E19948 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 6
Mailing Address 120 Easy St., Ste. 3		Amount of Each Disbursement this Period 15848.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Carol Stream State IL Zip Code 60188-	RENTAL OF TV EQUIPMENT <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENTAL OF TV EQUIPMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	16656.83
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Scott Palmer		Transaction ID: 61202.E20121 Date of Disbursement 11 / 09 / 2006	
Mailing Address P. O. Box 625		Amount of Each Disbursement this Period 906.36	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

Full Name (Last, First, Middle Initial) B. Scott Palmer		Transaction ID: 61202.E20122 Date of Disbursement 11 / 24 / 2006	
Mailing Address P. O. Box 625		Amount of Each Disbursement this Period 906.36	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

Full Name (Last, First, Middle Initial) C. PayPal/Verisign Payment Serv.		Transaction ID: 61202.E20110 Date of Disbursement 11 / 20 / 2006	
Mailing Address 2543 Coast Ave.		Amount of Each Disbursement this Period 59.95	
City Mountain View State CA Zip Code 94043-	Purpose of Disbursement COMPUTER SERVICE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type COMPUTER SERVICE	

SUBTOTAL of Disbursements This Page (optional) ▶	1872.67
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Photovision		Transaction ID: 61020.E19719 Date of Disbursement 10 / 20 / 2006
Mailing Address 401 Lake Ct.		Amount of Each Disbursement this Period 2726.00
City Oswego State IL Zip Code 60543-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PHOTOGRAPHY EXPENSE Candidate Name	Category/Type	PHOTOGRAPHY EXPENSE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sylvia Pletcher		Transaction ID: 61202.E20115 Date of Disbursement 11 / 09 / 2006
Mailing Address 13035 Church Rd.		Amount of Each Disbursement this Period 1201.30
City Yorkville State IL Zip Code 60560-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sylvia Pletcher		Transaction ID: 61202.E20116 Date of Disbursement 11 / 24 / 2006
Mailing Address 13035 Church Rd.		Amount of Each Disbursement this Period 1201.30
City Yorkville State IL Zip Code 60560-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5128.60
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Lisa Post		Transaction ID: 61202.E20117 Date of Disbursement 11 / 09 / 2006	
Mailing Address 5929 Lee Rd.		Amount of Each Disbursement this Period 7010.96	
City Shabbona State IL Zip Code 60550-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

Full Name (Last, First, Middle Initial) B. Lisa Post		Transaction ID: 61202.E20118 Date of Disbursement 11 / 24 / 2006	
Mailing Address 5929 Lee Rd.		Amount of Each Disbursement this Period 5168.62	
City Shabbona State IL Zip Code 60550-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

Full Name (Last, First, Middle Initial) C. Premiere Global Services		Transaction ID: 61101.E19941 Date of Disbursement 11 / 01 / 2006	
Mailing Address 1268 Payshere Circle		Amount of Each Disbursement this Period 103.48	
City Chicago State IL Zip Code 60674-	Purpose of Disbursement FAX SERVICE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type FAX SERVICE	

SUBTOTAL of Disbursements This Page (optional) ▶	12283.06
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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Q Center		Transaction ID: 61202.E19969 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6	
Mailing Address 1405 North 5th Ave.		Amount of Each Disbursement this Period 70485.43	
City Saint Charles State IL Zip Code 60174-	Purpose of Disbursement FUNDRAISING EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING EXPENSE	

Full Name (Last, First, Middle Initial) B. WBIG Radio		Transaction ID: 61105.E19945 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 620 S. Eola Rd.		Amount of Each Disbursement this Period 270.00	
City Aurora State IL Zip Code 60506-	Purpose of Disbursement ADVERTISING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ADVERTISING	

Full Name (Last, First, Middle Initial) C. Mike Ryan		Transaction ID: 61202.E19962 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6	
Mailing Address 34W360 Illinois St.		Amount of Each Disbursement this Period 462.50	
City Saint Charles State IL Zip Code 60174-	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL	

SUBTOTAL of Disbursements This Page (optional) ▶	71217.93
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Mike Ryan		Transaction ID: 61202.E19963 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 34W360 Illinois St.		Amount of Each Disbursement this Period 231.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Saint Charles State IL Zip Code 60174-	REIMBURSEMENT FOR TRAVEL	
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Southwest Publishing		Transaction ID: 61202.E19961 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 2600 NW Topeka Blvd.		Amount of Each Disbursement this Period 5466.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Topeka State KS Zip Code 66617-	FUNDRAISING EXPENSE	
Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. State of California		Transaction ID: 61101.E19936 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address Employment Development P. O. Box 826276		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sacramento State CA Zip Code 94230-6276	EMPLOYMENT TAXES	
Purpose of Disbursement EMPLOYMENT TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5748.01
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) Luke Stedman		Transaction ID: 61202.E20125 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6	
Mailing Address 318 Timberwood		Amount of Each Disbursement this Period 633.34	
City Irvine State CA Zip Code 92620-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement SALARY	Category/Type		
Candidate Name	SALARY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Luke Stedman		Transaction ID: 61202.E19983 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6	
Mailing Address 318 Timberwood		Amount of Each Disbursement this Period 124.72	
City Irvine State CA Zip Code 92620-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement REIMBURSEMENT FOR TRAVEL	Category/Type		
Candidate Name	REIMBURSEMENT FOR TRAVEL		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Luke Stedman		Transaction ID: 61202.E20126 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6	
Mailing Address 318 Timberwood		Amount of Each Disbursement this Period 633.34	
City Irvine State CA Zip Code 92620-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Purpose of Disbursement SALARY	Category/Type		
Candidate Name	SALARY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1391.40
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Mike Stokke		Transaction ID: 61202.E20119 Date of Disbursement 11 / 09 / 2006	
Mailing Address P. O. Box 625		Amount of Each Disbursement this Period 5198.79	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

Full Name (Last, First, Middle Initial) B. Mike Stokke		Transaction ID: 61202.E20120 Date of Disbursement 11 / 24 / 2006	
Mailing Address P. O. Box 625		Amount of Each Disbursement this Period 873.86	
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

Full Name (Last, First, Middle Initial) C. Strategic Media Services		Transaction ID: 61020.E19713 Date of Disbursement 10 / 19 / 2006	
Mailing Address 1023 31st, NW, 4th Floor		Amount of Each Disbursement this Period 136156.00	
City Washington State DC Zip Code 20007-	Purpose of Disbursement ADVERTISING	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 ADVERTISING

SUBTOTAL of Disbursements This Page (optional) ▶	142228.65
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Strategic Media Services		Transaction ID: 61202.E20144 Date of Disbursement 10 / 23 / 2006	
Mailing Address 1023 31st, NW, 4th Floor		Amount of Each Disbursement this Period 76062.00	
City Washington State DC Zip Code 20007-	Purpose of Disbursement ADVERTISING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ADVERTISING	

Full Name (Last, First, Middle Initial) B. Suburban Chicago Newspapers		Transaction ID: 61020.E19714 Date of Disbursement 10 / 19 / 2006	
Mailing Address 101 S. River St.		Amount of Each Disbursement this Period 5251.14	
City Aurora State IL Zip Code 60506-	Purpose of Disbursement ADVERTISING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ADVERTISING	

Full Name (Last, First, Middle Initial) C. Tele Town Hall Services		Transaction ID: 61202.E19975 Date of Disbursement 11 / 21 / 2006	
Mailing Address 5101 Mac Arthur Blvd. NW, #200		Amount of Each Disbursement this Period 2771.14	
City Washington State DC Zip Code 20016-	Purpose of Disbursement GET OUT THE VOTE PHONE CALLS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	GET OUT THE VOTE PHONE CALLS	

SUBTOTAL of Disbursements This Page (optional) ▶	84084.28
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. The Standard Club		Transaction ID: 61202.E19967 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 320 South Plymouth Ct.		Amount of Each Disbursement this Period 1575.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chicago State IL Zip Code 60604-	FUNDRAISING EXPENSE	
Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Upgrade Films		Transaction ID: 61023.E19852 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 1023 31st St., NW		Amount of Each Disbursement this Period 22500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20007-	ADVERTISING	
Purpose of Disbursement ADVERTISING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Upgrade Films		Transaction ID: 61101.E19931 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 1023 31st St., NW		Amount of Each Disbursement this Period 3629.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20007-	ADVERTISING	
Purpose of Disbursement ADVERTISING Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	27704.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Valley Community Bank		Transaction ID: 61101.E19939
Mailing Address 18 E. Wilson St.		Date of Disbursement 10 / 31 / 2006
City Batavia	State IL	Zip Code 60510-
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 2992.95	
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		PAYROLL TAXES

Full Name (Last, First, Middle Initial) B. Valley Community Bank		Transaction ID: 61202.E19957
Mailing Address 18 E. Wilson St.		Date of Disbursement 11 / 14 / 2006
City Batavia	State IL	Zip Code 60510-
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 10807.65	
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		PAYROLL TAXES

Full Name (Last, First, Middle Initial) C. Valley Community Bank		Transaction ID: 61202.E19958
Mailing Address 18 E. Wilson St.		Date of Disbursement 11 / 14 / 2006
City Batavia	State IL	Zip Code 60510-
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 13.20	
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
		PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)	13813.80
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Valley Community Bank		Transaction ID: 61202.E20109 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6
Mailing Address 18 E. Wilson St.		Amount of Each Disbursement this Period 20.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Batavia State IL Zip Code 60510-	Purpose of Disbursement SERVICE CHARGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SERVICE CHARGE

Full Name (Last, First, Middle Initial) B. Valley Community Bank		Transaction ID: 61202.E19973 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 6
Mailing Address 18 E. Wilson St.		Amount of Each Disbursement this Period 9451.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Batavia State IL Zip Code 60510-	Purpose of Disbursement PAYROLL TAXES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES

Full Name (Last, First, Middle Initial) C. Valley Community Bank		Transaction ID: 61202.E19972 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6
Mailing Address 18 E. Wilson St.		Amount of Each Disbursement this Period 9.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Batavia State IL Zip Code 60510-	Purpose of Disbursement PAYROLL TAXES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶	9481.80
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 61202.E20096 Date of Disbursement 10 / 30 / 2006	
Mailing Address P. O. Box 6170		Amount of Each Disbursement this Period 1219.06	
City Carol Stream State IL Zip Code 60197-6170	Purpose of Disbursement CELLULAR PHONE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CELLULAR PHONE		

Full Name (Last, First, Middle Initial) B. VIP Valet		Transaction ID: 61202.E19984 Date of Disbursement 11 / 21 / 2006	
Mailing Address 890 Tollgate Rd.		Amount of Each Disbursement this Period 6990.00	
City Elgin State IL Zip Code 60123-	Purpose of Disbursement FUNDRAISING EXPENSE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FUNDRAISING EXPENSE		

Full Name (Last, First, Middle Initial) C. Votilogy		Transaction ID: 61202.E19979 Date of Disbursement 11 / 21 / 2006	
Mailing Address 500 N. Michigan Ave., Ste. 300		Amount of Each Disbursement this Period 18153.57	
City Chicago State IL Zip Code 60611-	Purpose of Disbursement GET OUT THE VOTE PHONE CALLS	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ GET OUT THE VOTE PHONE CALLS		

SUBTOTAL of Disbursements This Page (optional) ▶	26362.63
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial) A. Derby Watkins		Transaction ID: 61202.E19959 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 6	
Mailing Address 3232 Wellington Rd.		Amount of Each Disbursement this Period 1250.00	
City Alexandria State VA Zip Code 22302-	Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FUNDRAISING EXPENSE	

Full Name (Last, First, Middle Initial) B. Marvin Williams		Transaction ID: 61202.E20129 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 6	
Mailing Address 611 Apple St.		Amount of Each Disbursement this Period 860.17	
City Dixon State IL Zip Code 61021-1178	Purpose of Disbursement SALARY Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		SALARY	

Full Name (Last, First, Middle Initial) C. Marvin Williams		Transaction ID: 61202.E20130 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 6	
Mailing Address 611 Apple St.		Amount of Each Disbursement this Period 860.17	
City Dixon State IL Zip Code 61021-1178	Purpose of Disbursement SALARY Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	2970.34
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial)

A. WLBK Radio

Mailing Address 711 N. First St.

City DeKalb State IL Zip Code 60115-

Purpose of Disbursement
ADVERTISING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61026.E19920

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	0		2	6		2	0	0	6

Amount of Each Disbursement this Period

490.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADVERTISING

SUBTOTAL of Disbursements This Page (optional)

490.00

TOTAL This Period (last page this line number only)

729682.85

**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 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)
Hastert for Congress Committee

Full Name (Last, First, Middle Initial)
A. IL Rep. Party Federal Account

Mailing Address 32 W. Randolph

City Chicago State IL Zip Code 60601-

Purpose of Disbursement
TRANSFER OF EXCESS FUNDS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 61101.E19944

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	1		0	1		2	0	0	6

Amount of Each Disbursement this Period

25000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

25000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Marvin Williams	Nature of Debt (Purpose): Reimbursement for travel
Mailing Address 611 Apple St.	
City State ZIP Code Dixon IL 61021-1178	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 13LS61221.E20229	
Amount Incurred This Period 420.37	Payment This Period 0.00	Outstanding Balance at Close of This Period 420.37

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor J. C. Schultz Enterprises, Inc.	Nature of Debt (Purpose): Fundraising expense
Mailing Address 951 Swanson Dr.	
City State ZIP Code Batavia IL 60510-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 18LS61216.E20171	
Amount Incurred This Period 103.36	Payment This Period 0.00	Outstanding Balance at Close of This Period 103.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Photovision	Nature of Debt (Purpose): Photography expense
Mailing Address 401 Lake Ct.	
City State ZIP Code Oswego IL 60543-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 9LS61216.E20166	
Amount Incurred This Period 735.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 735.00

1) SUBTOTALS This Period This Page (optional).....	1258.73
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express Corp.	Nature of Debt (Purpose): Express mail
Mailing Address P.O. Box 1140	
City State ZIP Code Memphis TN 38101-1140	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 2LS61217.E20210	
Amount Incurred This Period 137.45	Payment This Period 0.00	Outstanding Balance at Close of This Period 137.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alpha Graphics	Nature of Debt (Purpose): Printing expense
Mailing Address 2740 E. Main St.	
City State ZIP Code St. Charles IL 60174-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 3LS61216.E20165	
Amount Incurred This Period 618.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 618.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle	Nature of Debt (Purpose): Computer service
Mailing Address 205 Pennsylvania Ave. SE	
City State ZIP Code Washington DC 20003-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 19LS61216.E20164	
Amount Incurred This Period 1800.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1800.00

1) SUBTOTALS This Period This Page (optional).....	2555.67
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lisa Post	Nature of Debt (Purpose): Reimb for travel/fundrais- ing exp
Mailing Address 5929 Lee Rd.	
City State ZIP Code Shabbona IL 60550-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 1LS61217.E20201	
Amount Incurred This Period 512.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 512.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor A Balloon Creation	Nature of Debt (Purpose): Balloons for election nig- ht
Mailing Address 1118 Prairie St.	
City State ZIP Code Aurora IL 60506-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 14LS61216.E20163	
Amount Incurred This Period 641.25	Payment This Period 0.00	Outstanding Balance at Close of This Period 641.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lisa Wagner & Co.	Nature of Debt (Purpose): Fundraising expense
Mailing Address P. O. Box 446	
City State ZIP Code Aurora IL 60510-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 16LS61217.E20195	
Amount Incurred This Period 21818.93	Payment This Period 0.00	Outstanding Balance at Close of This Period 21818.93

1) SUBTOTALS This Period This Page (optional).....	22972.76
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
 (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McKenna Long & Aldridge			Nature of Debt (Purpose): Legal service
Mailing Address 303 Peachtree St., NE, Ste. 5300			
City State Atlanta GA	ZIP Code 30308-		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 8LS61216.E20156	
Amount Incurred This Period <input type="text" value="112528.08"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="112528.08"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Constituents Direct			Nature of Debt (Purpose): Web site production
Mailing Address 421 South Beverly Dr.			
City State Beverly Hills CA	ZIP Code 90212-		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 5LS61217.E20203	
Amount Incurred This Period <input type="text" value="600.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="600.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Campaigns			Nature of Debt (Purpose): Fundraising expense
Mailing Address 11150 Santa Monica Blvd., Ste. 450			
City State Los Angeles CA	ZIP Code 90025-		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 6LS61221.E20233	
Amount Incurred This Period <input type="text" value="105.94"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="105.94"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="113234.02"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Challenge Properties	Nature of Debt (Purpose): Rent for campaign office
Mailing Address 525 N. River St., Ste. 200	
City State ZIP Code Batavia IL 60510-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 12LS61221.E20230	
Amount Incurred This Period 1875.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1875.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor David W. From	Nature of Debt (Purpose): Reimbursement for travel
Mailing Address 980 Rosewood Dr.	
City State ZIP Code West Chicago IL 60185-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 4LS61217.E20200	
Amount Incurred This Period 522.91	Payment This Period 0.00	Outstanding Balance at Close of This Period 522.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions	Nature of Debt (Purpose): Fundraising expense
Mailing Address 118 N. St. Asaph St.	
City State ZIP Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 20LS61217.E20180	
Amount Incurred This Period 513.34	Payment This Period 0.00	Outstanding Balance at Close of This Period 513.34

1) SUBTOTALS This Period This Page (optional).....	2911.25
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 151 / 151
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Hastert for Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Safety Service Systems	Nature of Debt (Purpose): Election night security
Mailing Address 3809 N. Cicero Ave.	
City State ZIP Code Chicago IL 60641-	

Outstanding Balance Beginning This Period	Transaction ID: LS61216.E20168	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2214.00	0.00	2214.00

1) SUBTOTALS This Period This Page (optional).....	2214.00
2) TOTALS This Period (last page this line number only).....	145146.43
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	