

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
GUTIERREZ FOR CONGRESS

ADDRESS (number and street) 2846 N. River Walk Drive
 Check if different than previously reported. (ACC)
CHICAGO IL 60618

2. **FEC IDENTIFICATION NUMBER** C00254581
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
IL 04

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 Omaira Gutierrez

Signature of Treasurer Electronically Filed by Omaira Gutierrez Date 12 07 2006

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

GUTIERREZ FOR CONGRESS

Report Covering the Period: From: To:

| | 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))..... | 53000.00 | 167875.00 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 10500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 53000.00 | 157375.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 2745.84 | 78812.60 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 4655.40 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 2745.84 | 74157.20 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 153914.91 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

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

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

**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
GUTIERREZ FOR CONGRESS

Report Covering the Period: From: To:

I. RECEIPTS

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of | COLUMN C Total for |
|--|---|--|
| 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A) | <input type="text" value="11"/> <input type="text" value="07"/> <input type="text" value="2006"/> (date of general election) | <input type="text" value="11"/> <input type="text" value="08"/> <input type="text" value="2006"/> (date after general election) |
| <input type="text" value="21250.00"/> | | through <input type="text" value="11"/> <input type="text" value="27"/> <input type="text" value="2006"/> (last day of reporting period) |
| (ii) Unitemized | | |
| <input type="text" value="250.00"/> | | |
| (iii) Total of contributions from individuals | | |
| <input type="text" value="21500.00"/> | <input type="text" value="52650.00"/> | <input type="text" value="0.00"/> |
| (b) Political Party Committees | | |
| <input type="text" value="0.00"/> | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Other Political Committees | | |
| <input type="text" value="31500.00"/> | <input type="text" value="115225.00"/> | <input type="text" value="0.00"/> |

**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)) 53000.00 | 167875.00 | 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) 0.00 | 4655.40 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc) 0.00 | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) 53000.00 | 172530.40 | 0.00 |

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Write or Type Committe Name

GUTIERREZ FOR CONGRESS

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 | | |
| 2745.84 | 78812.60 | 500.00 |
| 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 | 0.00 | 0.00 |
| (b) Political Party Committees | | |
| 0.00 | 5500.00 | 0.00 |

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

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) |
|-------------------------------|---|--------------------------|--|
|-------------------------------|---|--------------------------|--|

(c) Other political committees (such as PACs)

| | | |
|------|---------|------|
| 0.00 | 5000.00 | 0.00 |
|------|---------|------|

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

| | | |
|------|----------|------|
| 0.00 | 10500.00 | 0.00 |
|------|----------|------|

21. OTHER DISBURSEMENTS

| | | |
|----------|-----------|------|
| 16000.00 | 204810.00 | 0.00 |
|----------|-----------|------|

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

| | | |
|----------|-----------|--------|
| 18745.84 | 294122.60 | 500.00 |
|----------|-----------|--------|

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))

| | | |
|----------|-----------|------|
| 53000.00 | 157375.00 | 0.00 |
|----------|-----------|------|

IV. NET OPERATING EXPENDITURES

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

| | | |
|---------|----------|--------|
| 2745.84 | 74157.20 | 500.00 |
|---------|----------|--------|

V. CASH SUMMARY

| | |
|--|-----------|
| 23. CASH ON HAND AT BEGINING OF REPORTING PERIOD | 119660.75 |
| 24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16)..... | 53000.00 |
| 25. SUBTOTAL(add Line 23 and Line 24) | 172660.75 |
| 26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22)..... | 18745.84 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25)..... | 153914.91 |

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 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Bharat H. Barai | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 9903 Twin Creek Blvd. | | Transaction ID: SA11A1.9223 | |
| City State Zip Code Munster IN 46321 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer Self employed Occupation businessman | Election Cycle-to-Date 1000.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Navin Barot | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 506 St. Andrews | | Transaction ID: SA11A1.9219 | |
| City State Zip Code Schererville IN 46375 | Amount of Each Receipt this Period 2000.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer Self employed Occupation Medical Doctor | Election Cycle-to-Date 2000.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth Brunsvold | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 | |
| Mailing Address 340 W. Old Town Court | | Transaction ID: SA11A1.9277 | |
| City State Zip Code Chicago IL 60610 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | |
| Name of Employer Chapman & Cutler Occupation Government Affairs Coordinator | Election Cycle-to-Date 500.00 | | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | |
|--|---------|
| 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 8 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Theodore Brunsvold | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 340 W. Old Town Court | | Transaction ID: SA11A1.9279 |
| City State Zip Code Chicago IL 60610 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer ILL Governmental Consult Group | Occupation consultant | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Roberto Caldero | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 5731 N. Central Park | | Transaction ID: SA11A1.9269 |
| City State Zip Code Chicago IL 60659 | Amount of Each Receipt this Period 2500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self employed | Occupation Consultant | |
| 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) C. Itay Feldman | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 1448 N. Mohawk | | Transaction ID: SA11A1.9287 |
| City State Zip Code Chicago IL 60610 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer State of Illinois | Occupation Administrator | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3250.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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 9 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Oscar Fragoso | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 523 Longcommon Road | | Transaction ID: SA11A1.9285 |
| City State Zip Code Riverside IL 60546 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer State of Illinois Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Administrator Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Dr. Ram Gajjela | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 8982 Coppergate Road | | Transaction ID: SA11A1.9217 |
| City State Zip Code Woodridge IL 60517 | Amount of Each Receipt this Period 300.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer self employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation physician Election Cycle-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Fernando Grillo | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 1223-25 N. Greenview 2 South | | Transaction ID: SA11A1.9271 |
| City State Zip Code Chicago IL 60622 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Ramirez & Co. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| 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 10 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Steven John Guerra | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 | |
| Mailing Address 1920 N. Dayton | | Transaction ID: SA11A1.9281 | |
| City State Zip Code Chicago IL 60614 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer State of Illinois Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Administrator Election Cycle-to-Date ▼ 500.00 | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Brian Hynes | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 | |
| Mailing Address 111 East Wacker Drive Suite 2800 | | Transaction ID: SA11A1.9273 | |
| City State Zip Code Chicago IL 60601 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Shefsky & Froelich, Ltd. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney/Partner Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Reynaldo A. Ilagan | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 | |
| Mailing Address 3300 N. Natoma | | Transaction ID: SA11A1.9220 | |
| City State Zip Code Chicago IL 60634 | Amount of Each Receipt this Period 1500.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Self employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation real estate Election Cycle-to-Date ▼ 1500.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Angie Lopez | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 703 W. San Miguel Avenue | | Transaction ID: SA11A1.9227 |
| City State Zip Code Phoenix AZ 85013 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer homemaker | Occupation homemaker | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Subir Maitra | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 512 N. McClurg Ct. | | Transaction ID: SA11A1.9221 |
| City State Zip Code Chicago IL 60611 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Self employed | Occupation consultant | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Anita B. Nayak | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 19W121 Avenue Chateaux | | Transaction ID: SA11A1.9225 |
| City State Zip Code Oak Brook IL 60523 | Amount of Each Receipt this Period 2100.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer homemaker | Occupation homemaker | |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2100.00 | |

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

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 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Raghuveer P. Nayak

Mailing Address 19W121 Avenue Chateaux

City State Zip Code
Oak Brook IL 60523

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

Name of Employer Self Occupation Doctor

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 4 / 2 0 0 6

Transaction ID: SA11A1.9226

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Juan Ochoa

Mailing Address 2825 South Karlov

City State Zip Code
Chicago IL 60623

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

Name of Employer IL Hispanic Chamber of Commerce Occupation President

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 6 / 2 0 0 6

Transaction ID: SA11A1.9275

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Lorenzo Padron

Mailing Address 607 Huber Lane

City State Zip Code
Glen View IL 60025

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

Name of Employer State of Illinois Occupation Department of Financial Institutions

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: SA11A1.9284

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **3350.00**

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 13 / 24 |
| | (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)
GUTIERREZ FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Anne Petrovic

Mailing Address 10374 Sutton Place

City State Zip Code
Munster IN 46321

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

Name of Employer Occupation
homemaker homemaker

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 6 / 2 0 0 6

Transaction ID: SA11A1.9282

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Manuel Sanchez

Mailing Address 2137 Scarlet Lane

City State Zip Code
Lisle IL 60532

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

Name of Employer Occupation
Sanchez & Daniels 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
1 1 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.9270

Amount of Each Receipt this Period
2000.00

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

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) | ▶ | 21250.00 |

**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 14 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE ('OPHTHPAC') | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 655 BEACH STREET | | Transaction ID: SA11C.9213 |
| City SAN FRANCISCO State CA Zip Code 94109 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00196246 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| 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 ▼ 3000.00 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. CME/PAC CHICAGO MERCANTILE EXCHANGE PAC | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 30 SOUTH WACKER DRIVE | | Transaction ID: SA11C.9261 |
| City CHICAGO State IL Zip Code 60606 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00076299 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| 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 ▼ 1000.00 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. CUMMINS-ALLISON CORP EMPLOYEES FOR GOOD GOVERNMENT | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 1919 Algonquin Road C/O ROBIN F DAVIES | | Transaction ID: SA11C.9250 |
| City Rolling Meadows State IL Zip Code 60008 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00408914 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| 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 ▼ 1000.00 | | |

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATION POLITICAL ACTION COMMITTEE) | | Date of Receipt |
| Mailing Address P O BOX 909700 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| City State Zip Code KANSAS CITY MO 64190 | | Transaction ID: SA11C.9248 |
| FEC ID number of contributing federal political committee. C C00001388 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DRIVE Committee Teamsters Joint Council 25 | | Date of Receipt |
| Mailing Address 25 Louisiana Avenue NW | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| City State Zip Code Wahington DC 20001 | | Transaction ID: SA11C.9208 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELONPAC) | | Date of Receipt |
| Mailing Address 1 FINANCIAL PLACE 440 S. LASALLE ST. 33RD FLOOR | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| City State Zip Code CHICAGO IL 60605 | | Transaction ID: SA11C.9205 |
| FEC ID number of contributing federal political committee. C C00141218 | | Amount of Each Receipt this Period 3000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 6000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 9000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|--|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACTION COMMITTEE AKA FANNIE MAE | | Date of Receipt |
| Mailing Address 3900 Wisconsin Avenue NW | | M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| City | State | Zip Code |
| Washington | DC | 20016 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.9212 |
| C C00393520 | | Amount of Each Receipt this Period |
| | | 2000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 2000.00 | |

| | | |
|--|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. H & R BLOCK POLITICAL ACTION COMMITTEE (BLOCKPAC) | | Date of Receipt |
| Mailing Address 4400 MAIN STREET | | M M / D D / Y Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| City | State | Zip Code |
| KANSAS CITY | MO | 64111 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.9252 |
| C C00188177 | | Amount of Each Receipt this Period |
| | | 500.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 500.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION | | Date of Receipt |
| Mailing Address 1125 15TH ST N.W. | | M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| City | State | Zip Code |
| WASHINGTON | DC | 20005 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.9262 |
| C C00027342 | | Amount of Each Receipt this Period |
| | | 2000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 | Election Cycle-to-Date ▼ | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 2000.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 4500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 / 24 |
| | (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)
GUTIERREZ FOR CONGRESS

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6 |
| Mailing Address 1750 New York Avenue NW | | Transaction ID: SA11C.9206 |
| City Washington | State DC | Zip Code 20006 |
| FEC ID number of contributing federal political committee. C C00000885 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MONEYGRAM INTERNATIONAL INC GOOD GOVERNMENT FUND | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 1550 UTICA AVENUE SOUTH MS 8020 | | Transaction ID: SA11C.9265 |
| City MINNEAPOLIS | State MN | Zip Code 55416 |
| FEC ID number of contributing federal political committee. C C00410316 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 3138 North 10th Street | | Transaction ID: SA11C.9263 |
| City Arlington | State VA | Zip Code 22201 |
| FEC ID number of contributing federal political committee. C C00040659 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 24 |
| | <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. REALTORS POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 430 NORTH MICHIGAN AVE | | Transaction ID: SA11C.9246 |
| City State Zip Code CHICAGO IL 60611 | Amount of Each Receipt this Period 3000.00 | |
| FEC ID number of contributing federal political committee. C C00030718 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| 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 ▼ 7000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. SALLIE MAE INC POLITICAL ACTION COMMITTEE (SALLIE MAE PAC) | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6 |
| Mailing Address 11600 SALLIE MAE DRIVE | | Transaction ID: SA11C.9244 |
| City State Zip Code RESTON VA 20193 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00331835 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| 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 ▼ 2000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. SALLIE MAE INC POLITICAL ACTION COMMITTEE (SALLIE MAE PAC) | | Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6 |
| Mailing Address 11600 SALLIE MAE DRIVE | | Transaction ID: SA11C.9267 |
| City State Zip Code RESTON VA 20193 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00331835 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| 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 ▼ 4000.00 | |

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 7000.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 / 24 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 11d | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
GUTIERREZ FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UBS AMERICAS FUND FOR BETTER GOVERNMENT

Mailing Address 1285 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C** C00012245

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
1 0 / 2 4 / 2 0 0 6

Transaction ID: SA11C.9214

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
UNITED AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 66100
ATTN: Financial Reporting-WHQAJ

City State Zip Code
CHICAGO IL 60666

FEC ID number of contributing federal political committee. **C** C00078261

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
1 1 / 0 3 / 2 0 0 6

Transaction ID: SA11C.9247

Amount of Each Receipt this Period
2000.00

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) | 31500.00 |

**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)

PAGE 20 / 24

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
GUTIERREZ FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. American Airlines | | Transaction ID: SB17.9302 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6 |
| Mailing Address O'Hare Airport | | Amount of Each Disbursement this Period 307.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chicago State IL Zip Code 60660 | | |
| Purpose of Disbursement air fare for 2007 Inauguration-candidate Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Airlines | | Transaction ID: SB17.9309 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6 |
| Mailing Address O'Hare Airport | | Amount of Each Disbursement this Period 321.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chicago State IL Zip Code 60660 | | |
| Purpose of Disbursement candidate travel aspira conference Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Mireya Hurtado | | Transaction ID: SB17.9304 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6 |
| Mailing Address 1735 N. Spaulding | | Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Chicago State IL Zip Code 60647 | | |
| Purpose of Disbursement services to campaign committee Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1128.20 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GUTIERREZ FOR CONGRESS

| | | |
|---|--|--|
| A. Mr. K's Full Name (Last, First, Middle Initial) Mr. K's Mailing Address 2121 K Street NW City Washington State DC Zip Code 20037 Purpose of Disbursement staff meeting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.9310 Date of Disbursement 11 / 02 / 2006 Amount of Each Disbursement this Period 171.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

| | | |
|---|--|--|
| B. Renaissance Hotel Full Name (Last, First, Middle Initial) Renaissance Hotel Mailing Address 99 - 9th Street, NW City Washington State DC Zip Code 20001 Purpose of Disbursement congress. Hispanic Caucus Conference Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.9300 Date of Disbursement 10 / 27 / 2006 Amount of Each Disbursement this Period 527.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|---|--|--|

| | | |
|--|--|--|
| C. U.S. Airway Full Name (Last, First, Middle Initial) U.S. Airway Mailing Address Ohare Airport City Chicago State IL Zip Code 60659 Purpose of Disbursement candidate travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: SB17.9311 Date of Disbursement 11 / 02 / 2006 Amount of Each Disbursement this Period 228.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
|--|--|--|

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 927.24 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 24

| | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <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)
GUTIERREZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 777 Big Timber Road

City Elgin State IL Zip Code 60123

Purpose of Disbursement
candidate cell phone charges
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB17.9303

Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|--------|
| 127.06 |
|--------|

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

SUBTOTAL of Disbursements This Page (optional)

127.06

TOTAL This Period (last page this line number only)

2182.50

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 24

| | | | |
|------------------------------|------------------------------|------------------------------|--|
| <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)
GUTIERREZ FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. BROWN FOR CONGRESS | | Transaction ID: SB21.9293 Date of Disbursement 10 / 26 / 2006 |
| Mailing Address P. O. Box 4506 | | Amount of Each Disbursement this Period 1000.00 |
| City Auburn State CA Zip Code 95604 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement congress candidate Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. DARCY BURNER FOR CONGRESS | | Transaction ID: SB21.9298 Date of Disbursement 10 / 31 / 2006 |
| Mailing Address PO BOX 1090 | | Amount of Each Disbursement this Period 1000.00 |
| City CARNATION State WA Zip Code 98014 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement congressional candidate Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE | | Transaction ID: SB21.9297 Date of Disbursement 10 / 30 / 2006 |
| Mailing Address 430 South Capitol Street SE 2nd Floor | | Amount of Each Disbursement this Period 10000.00 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement contribution Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 12000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GUTIERREZ FOR CONGRESS

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. FRIENDS OF PHIL HARE | | Transaction ID: SB21.9295 Date of Disbursement 10 / 26 / 2006 |
| Mailing Address 313 17th Street P.O. Box 4183 | | Amount of Each Disbursement this Period 1000.00 |
| City Rock Island State IL Zip Code 61202 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement congress candidate Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Latino Citizens for Respect | | Transaction ID: SB21.9320 Date of Disbursement 11 / 02 / 2006 |
| Mailing Address 416 East Main Street | | Amount of Each Disbursement this Period 1000.00 |
| City Bridgeport State CT Zip Code 06608 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement donation Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. PASTOR FOR ARIZONA | | Transaction ID: SB21.9292 Date of Disbursement 10 / 20 / 2006 |
| Mailing Address PO BOX 6554 | | Amount of Each Disbursement this Period 2000.00 |
| City PHOENIX State AZ Zip Code 85005 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement fed candidate congress contrib Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | 16000.00 |