

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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  
Prairie Political Action Committee

ADDRESS (number and street) P.O. Box 2002  
 Check if different than previously reported. (ACC)  
Springfield IL 62705

2. **FEC IDENTIFICATION NUMBER** C00347195  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2008 through 06 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Daly

Signature of Treasurer Electronically Filed by Michael Daly Date 10 19 2008

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Prairie Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		120484.39
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	153889.90									
(c) Total Receipts (from Line 19) .....	47941.00	178915.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	201830.90	299400.23								
7. Total Disbursements (from Line 31) .....	79898.16	177467.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	121932.74	121932.74								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Prairie Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5500.00	78300.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	5500.00	78300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	42000.00	94000.00
(c) Other Political Committees (such as PACs) .....	47500.00	172300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	441.00	1615.84
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	47941.00	178915.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	47941.00	178915.84

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	6898.16	27467.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6898.16	27467.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	67000.00	142000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	6000.00	8000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	79898.16	177467.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79898.16	177467.49

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	47500.00	172300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47500.00	172300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6898.16	27467.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6898.16	27467.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
Prairie Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Timothy F. Hannegan

Mailing Address 6601 Lybrook Ct.

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Consultant Occupation Wexler & Walker Public Policy Associat

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** C4182338

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Gordon Macdougall

Mailing Address 4797 Yorktown Blvd.

City State Zip Code  
Arlington VA 22207

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

Name of Employer Beacon Consulting Group Occupation Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

**Transaction ID:** C4182350

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
John N. Stern

Mailing Address 640 Winnetka Mews  
Apt 104

City State Zip Code  
Winnetka IL 60093-1956

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

Name of Employer None Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

**Transaction ID:** C4186078

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	5500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 19  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION

Mailing Address 1050 31st Street N.W.

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** C4182345

Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
American Podiatric Medical Assn. PAC

Mailing Address 9312 Old Georgetown Road

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** C4179688

Amount of Each Receipt this Period: 5000.00

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

Mailing Address P.O. Box 961039 Suite 220

City Fort Worth State TX Zip Code 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2008

**Transaction ID:** C4186081

Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 19  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street  
35th Floor

City State Zip Code  
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2008

Transaction ID: C4186082

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
CONTINENTAL AIRLINES INC EMPLOYEE FUND FOR A BETTE

Mailing Address 1600 SMITH STREET  
SUITE HQSGV-41st FLOOR

City State Zip Code  
HOUSTON TX 77002

FEC ID number of contributing federal political committee. **C** C00101766

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 12 / 2008

Transaction ID: C4182352

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
KIDNEY CARE PARTNERS POLITICAL ACTION COMMITTEE (K

Mailing Address 13948 MARBLESTONE DRIVE  
C/O SUSAN MURDOCK

City State Zip Code  
CLINTON VA 20124

FEC ID number of contributing federal political committee. **C** C00431924

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2008

Transaction ID: C4186080

Amount of Each Receipt this Period

2000.00

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

9500.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
LIBERTY MUTUAL INSURANCE COMPANY-PAC

Mailing Address 175 Berkeley Steet

City State Zip Code  
Boston MA 02117

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2008

**Transaction ID:** C4186079

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2008

**Transaction ID:** C4182342

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2008

**Transaction ID:** C4182343

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 19  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 205 Daingerfield Road

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** C4182340

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
New York Life Political Action Committee

Mailing Address 51 Madison Ave.

City State Zip Code  
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 12 / 2008

**Transaction ID:** C4182358

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Verizon Communications Inc. Good Govt.Club

Mailing Address GOOD GOVERNMENT CLUB  
1717 ARCH ST. 47S

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2008

**Transaction ID:** C4179687

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	42000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 19	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Chase Bank		Date of Receipt
Mailing Address 7610 W Washington St		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
City	State	Zip Code
Indianapolis	IN	46231-1335
FEC ID number of contributing federal political committee.		Transaction ID: C4198137
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="441.00"/>
Occupation		
Receipt For: 2008	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1615.84"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="441.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="441.00"/>

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

A.	Full Name (Last, First, Middle Initial) A T & T	Transaction ID: D191756 Date of Disbursement 06 / 02 / 2008
	Mailing Address PO Box 27	Amount of Each Disbursement this Period 195.02
	City Kansas City State MO Zip Code 64184-0001	
	Purpose of Disbursement Phone bill Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Ed Greelegs	Transaction ID: D191755 Date of Disbursement 06 / 02 / 2008
	Mailing Address 5709 Kirkwood Dr	Amount of Each Disbursement this Period 3000.00
	City Bethesda State MD Zip Code 20816-3310	
	Purpose of Disbursement Fundraising consultant for Prairie PAC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Ed Greelegs	Transaction ID: D191771 Date of Disbursement 06 / 30 / 2008
	Mailing Address 5709 Kirkwood Dr	Amount of Each Disbursement this Period 3000.00
	City Bethesda State MD Zip Code 20816-3310	
	Purpose of Disbursement Fundraising consultant for Prairie PAC Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6195.02
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 352 W. Grand Ave. City Chicago State IL Zip Code 60610 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D191759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 124.74
<b>B.</b> Full Name (Last, First, Middle Initial) The Monadnock Building Mailing Address 53 W. Jackson City Chicago State IL Zip Code 60604 Purpose of Disbursement Rent for campaign office Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D191757 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 578.40

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>703.14</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6898.16</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) ALASKANS FOR BEGICH EXPLORATORY COMMITTEE		Transaction ID: D191772 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 8
Mailing Address PO BOX 240287		Amount of Each Disbursement this Period 5000.00
City ANCHORAGE State AK Zip Code 99524	Purpose of Disbursement Contribution Candidate Name Mark Begich Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 09	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) ALASKANS FOR BEGICH EXPLORATORY COMMITTEE		Transaction ID: D191773 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 8
Mailing Address PO BOX 240287		Amount of Each Disbursement this Period 5000.00
City ANCHORAGE State AK Zip Code 99524	Purpose of Disbursement Contribution Candidate Name Mark Begich Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) ANDREW RICE FOR US SENATE INC		Transaction ID: D191774 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8
Mailing Address PO BOX 1027		Amount of Each Disbursement this Period 2000.00
City OKLAHOMA CITY State OK Zip Code 73102	Purpose of Disbursement Contribution Candidate Name Andrew Rice Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input 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 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bill Foster for Congress	Transaction ID: D191758 Date of Disbursement
	Mailing Address PO Box 703	<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Geneva State IL Zip Code 60134	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Mr. Bill Foster	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 14	

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BRUCE LUNSFORD	Transaction ID: D191761 Date of Disbursement
	Mailing Address 1500 BARDSTOWN ROAD SECOND FLOOR	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City LOUISVILLE State KY Zip Code 40205	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Bruce Lunsford	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: KY District:	

C.	Full Name (Last, First, Middle Initial) FRIENDS OF SCOTT HARPER	Transaction ID: D194074 Date of Disbursement
	Mailing Address 5829 DEARBORN PKWY	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City DOWNERS GROVE State IL Zip Code 60516	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Scott Harper	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hagan for Senate</p> <p>Mailing Address P.O. Box 29103</p> <p>City Greensboro State NC Zip Code 27429</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Kay Hagan</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D191764 <b>Date of Disbursement</b> 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Halvorson for Congress</p> <p>Mailing Address P.O. Box 176</p> <p>City Crete State IL Zip Code 60417</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Debbie Halvorson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D194078 <b>Date of Disbursement</b> 06 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JOE GARCIA FOR CONGRESS</p> <p>Mailing Address 12930 SW 128 STREET SUITE 102</p> <p>City MIAMI State FL Zip Code 33186</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Joe Garcia</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D191766 <b>Date of Disbursement</b> 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

15000.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) KLEEB FOR CONGRESS</p> <p>Mailing Address 109 N HASTINGS AVENUE</p> <p>City HASTINGS State NE Zip Code 68901</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Scott M. Kleeb</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D191763</p> <p>Date of Disbursement 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Melissa Bean for Congress</p> <p>Mailing Address POST OFFICE BOX 3068</p> <p>City BARRINGTON State IL Zip Code 60010</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Melissa Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D191770</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MUSGROVE FOR U S SENATE</p> <p>Mailing Address 600 CONCOURSE SUITE 100 1076 HIGHLAND COLONY PARKWAY</p> <p>City RIDGELAND State MS Zip Code 39157</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name David R. Musgrove</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D191762</p> <p>Date of Disbursement 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

A.	Full Name (Last, First, Middle Initial) SLATTERY FOR SENATE	Transaction ID: D191760 Date of Disbursement
	Mailing Address BOX 4486	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City TOPEKA State KS Zip Code 66604	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Jim Slattery	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: KS District:	

B.	Full Name (Last, First, Middle Initial) Titus for Congress	Transaction ID: D191765 Date of Disbursement
	Mailing Address 1637 Travois Circle	<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Las Vegas State NV Zip Code 89119	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Dina Titus	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="67000.00"/>

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Prairie Political Action Committee

A.	Full Name (Last, First, Middle Initial) Anita Alvarez for State's ATorney	Transaction ID: D191769
	Mailing Address P.O. Box 5350	Date of Disbursement MM / DD / YYYY 06 / 27 / 2008
	City River Forest State IL Zip Code 60305	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Anita Alvarez for State's ATorney	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Tumulty	Transaction ID: D191767
	Mailing Address P.O. Box 5222	Date of Disbursement MM / DD / YYYY 06 / 25 / 2008
	City Springfield State IL Zip Code 62705	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Citizens for Tumulty	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Stradt for State's Attorney	Transaction ID: D191768
	Mailing Address P.O. Box 5662	Date of Disbursement MM / DD / YYYY 06 / 25 / 2008
	City Springfield State IL Zip Code 62705	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Stradt for State's Attorney	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	6000.00