

**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

Midwest Values PAC

ADDRESS (number and street) P.O. Box 583232

Check if different than previously reported. (ACC)

Minneapolis MN 55458

2. **FEC IDENTIFICATION NUMBER** C00416131

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:

<input checked="" type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day Post -Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 01 01 2006 through 01 31 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 Thomas Borman

Signature of Treasurer Electronically Filed by Thomas Borman Date 02 20 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
Midwest Values PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">106715.81</td></tr></table>	106715.81
Y	Y	Y	Y									
2	0	0	6									
106715.81												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">106715.81</td></tr></table>	106715.81										
106715.81												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">89843.33</td></tr></table>	89843.33	<table border="1" style="width: 100%;"><tr><td align="right">89843.33</td></tr></table>	89843.33								
89843.33												
89843.33												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">196559.14</td></tr></table>	196559.14	<table border="1" style="width: 100%;"><tr><td align="right">196559.14</td></tr></table>	196559.14								
196559.14												
196559.14												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">29268.63</td></tr></table>	29268.63	<table border="1" style="width: 100%;"><tr><td align="right">29268.63</td></tr></table>	29268.63								
29268.63												
29268.63												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">167290.51</td></tr></table>	167290.51	<table border="1" style="width: 100%;"><tr><td align="right">167290.51</td></tr></table>	167290.51								
167290.51												
167290.51												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
Midwest Values PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	71800.00	71800.00
(i) Itemized (use Schedule A)	16945.00	16945.00
(ii) Unitemized	88745.00	88745.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	1000.00	1000.00
(c) Other Political Committees (such as PACs)	89745.00	89745.00
(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)	9.00	9.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	89.33	89.33
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))	89843.33	89843.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	89843.33	89843.33

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	28168.63	28168.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28168.63	28168.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
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	100.00	100.00
(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))	100.00	100.00
29. Other Disbursements.....	0.00	0.00
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))..	29268.63	29268.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	29268.63	29268.63

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)	89745.00	89745.00
34. Total Contribution Refunds (from Line 28(d))	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	89645.00	89645.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28168.63	28168.63
37. Offsets to Operating Expenditures (from Line 15, page 3)	9.00	9.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28159.63	28159.63

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Wendy Abrams		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 45 Lakewood Pl		Transaction ID: C290224	
City State Zip Code Highland Park IL 60035	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Homemaker/Philanthropist	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Andrew J. Alexander		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 1939 N. Orchard		Transaction ID: C290225	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Second City Occupation Business Owner	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Stephanie Andersen-Formolo		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 115 DeWindt Rd		Transaction ID: C290098	
City State Zip Code Winnetka IL 60093	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Adam Aron		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 95 Brentwood Dr		Transaction ID: C290099	
City Glencoe	State IL	Amount of Each Receipt this Period 2000.00	
Zip Code 60022			
FEC ID number of contributing federal political committee. C			
Name of Employer Vail Resorts	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Jennifer Aubrey		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 2450 N Lakeview Ave		Transaction ID: C290228	
City Chicago	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 60614-2878			
FEC ID number of contributing federal political committee. C			
Name of Employer Sidney Garber Jewelers	Occupation Jeweler		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. David Axelrod		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 505 N. Lake Shore Drive, #4604		Transaction ID: C290229	
City Chicago	State IL	Amount of Each Receipt this Period 2000.00	
Zip Code 60611			
FEC ID number of contributing federal political committee. C			
Name of Employer AKP Media	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Robert Baizer		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 6	
Mailing Address 890 Windsor Rd.		Transaction ID: C289777	
City Highland Park	State IL	Amount of Each Receipt this Period 100.00	
Zip Code 60035		Transaction ID: C289777	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Baizer & Kolar PC	Occupation Attorney	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) B. Robert Baizer		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 890 Windsor Rd.		Transaction ID: C290100	
City Highland Park	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 60035		Transaction ID: C290100	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Baizer & Kolar PC	Occupation Attorney	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) C. William Benter		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 6	
Mailing Address Acusis LLC 200 First Avenue		Transaction ID: C289766	
City Pittsburgh	State PA	Amount of Each Receipt this Period 5000.00	
Zip Code 15222		Transaction ID: C289766	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Acusis LLC	Occupation Business Owner	Amount of Each Receipt this Period 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Amount of Each Receipt this Period 5000.00	

SUBTOTAL of Receipts This Page (optional)	6100.00
TOTAL This Period (last page this line number only)	6100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Jason S Bentley		Date of Receipt MM / DD / YYYY 01 / 31 / 2006
Mailing Address 2035 W. Armitage, Unit 2		Transaction ID: C290165
City Chicago	State IL	Zip Code 60647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hinshaw & Culbertson	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Eric Brunick		Date of Receipt MM / DD / YYYY 01 / 26 / 2006
Mailing Address 2331 N Kedzie Blvd #2W		Transaction ID: C289808
City Chicago	State IL	Zip Code 60647
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Freed & Weiss	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Michael Busija		Date of Receipt MM / DD / YYYY 01 / 12 / 2006
Mailing Address 772 Timothy Lane		Transaction ID: C288684
City Des Plaines	State IL	Zip Code 60016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Don Roth's Blackhawk	Occupation Restaurant Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial)
Lester N. Coney

Mailing Address 4722 S. Greenwood

City State Zip Code
Chicago IL 60615

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

Name of Employer Occupation
Aon Consulting Senior Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: C290164

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Catherine M Coughlin

Mailing Address 322 Washington

City State Zip Code
Barrington IL 60010

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

Name of Employer Occupation
SBC President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C290169

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Oscar David

Mailing Address 1045 Dinsmore Road

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
Winston & Strawn Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C290172

Amount of Each Receipt this Period
1000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Eric Davis		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 1112 N Lombard Ave		Transaction ID: C290173	
City State Zip Code Oak Park IL 60302		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Daniel Mann Johnson Mendenhall Occupation Architect			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. David Duckler		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 340 Old Green Bay		Transaction ID: C290177	
City State Zip Code Glencoe IL 60022		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Trader			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Gunnar Erickson		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6	
Mailing Address 9902 Crystal Court, #107		Transaction ID: C289760	
City State Zip Code Laredo TX 78045		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Erickson Law Firm Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 35
	<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	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Paul Fox		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 694 Willow Tree Ln		Transaction ID: C290182	
City State Zip Code Glencoe IL 60022	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Greenberg Traurig	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Scott H. Gendell		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 8707 Skokie Blvd Suite 230		Transaction ID: C290183	
City State Zip Code Skokie IL 60077-2272	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Terraco, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Greg Goldsborough		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6	
Mailing Address 1630 Chicago Avenue #1807		Transaction ID: C288673	
City State Zip Code Evanston IL 60201	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Accenture	Occupation Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Andy Greene		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6	
Mailing Address 2257 West St. Paul		Transaction ID: C289771	
City State Zip Code Chicago IL 60647	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Sonnenschein Nath Rosenthal	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Timothy Hall		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 6	
Mailing Address 3731 N Pine Grove #2S		Transaction ID: C288674	
City State Zip Code Chicago IL 60613	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of Chicago	Occupation Research Fellow		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Amanda Hanley		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 1310 Scott		Transaction ID: C290188	
City State Zip Code Winnetka IL 60093	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Jonathan Harries		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 2140 N. Dayton		Transaction ID: C290189	
City Chicago	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 60614		FEC ID number of contributing federal political committee. C	
Name of Employer Foote Cone and Belding	Occupation Chairman/CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) B. Keith A. Hebeisen		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 2828 Woodmere Ct.		Transaction ID: C290119	
City Northbrook	State IL	Amount of Each Receipt this Period 5000.00	
Zip Code 60062		FEC ID number of contributing federal political committee. C	
Name of Employer Clifford Law Offices	Occupation Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) C. Ronald G. Himmelman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 466 Madison		Transaction ID: C290191	
City Glencoe	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 60022		FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Physician	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Jeffrey F. Kahan		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 574 Woodlawn		Transaction ID: C290196	
City State Zip Code Glencoe IL 60022		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Colliers Bennett & Kahnwe-ller Inc.		Occupation Exec. VP, Real Estate Investment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. David B. Kahn		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address One Northfield Plaza Suite 100		Transaction ID: C290197	
City State Zip Code Northfield IL 60093-1211		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer David B. Kahn & Assoc.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Carrie L. Kaufman		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 2535 Gordon Dr		Transaction ID: C290199	
City State Zip Code Flossmoor IL 60422		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer PerformInk, Inc.		Occupation Publisher/Editor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) John Kupper Mailing Address 522 8th Street City Wilmette State IL Zip Code 60091 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290200 Amount of Each Receipt this Period 250.00
Name of Employer: AKP Message & Media Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Ruth A. Lednicer Mailing Address 3827 N. Wilton City Chicago State IL Zip Code 60613 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290202 Amount of Each Receipt this Period 250.00
Name of Employer: City of Chicago Occupation: Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) John Marco Mailing Address 2426 Lincolnwood Dr. City Evanston State IL Zip Code 60201 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290129 Amount of Each Receipt this Period 1000.00
Name of Employer: Marco Consulting Group Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Robert Olian Mailing Address 10 S. Dearborn		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
City State Zip Code Chicago IL 60610		Transaction ID: C290138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sidley Austin	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Nancy Pred Mailing Address 1347 Sunview		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
City State Zip Code Winnetka IL 60093		Transaction ID: C290142
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Seneca Stratagy Partners	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Erica Ramis Mailing Address 1 Northfield Pl		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 6
City State Zip Code Northfield IL 60093		Transaction ID: C291099
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4700.00
Name of Employer Self-Employed	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4700.00	* In-Kind: Food & Event Costs

SUBTOTAL of Receipts This Page (optional) ▶	5950.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Harold Ramis Mailing Address 1 Northfield Pl City Northfield State IL Zip Code 60093 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 6 Transaction ID: C291097 Amount of Each Receipt this Period 4700.00
Name of Employer Ocean Pictures Occupation Film Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4700.00		* In-Kind: Food & Event Costs

B. Full Name (Last, First, Middle Initial) Margo McCoy Reese Mailing Address 2126 N Kenmore City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290215 Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Mary Lu R. Roffe Mailing Address 210 E Walton Pl, #4 City Chicago State IL Zip Code 60611 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290216 Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed Occupation Theater Producer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	6700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Eric Sedler		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 1000 W Washington Blvd. #304		Transaction ID: C290218
City State Zip Code Chicago IL 60607	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AT&T	Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Peggy Shapiro		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 6
Mailing Address 2555 N. Clark St. #206		Transaction ID: C291096
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Peggy Shapiro Graphic Design, Inc.	Occupation Graphic Design	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	* In-Kind: Graphic Design Services

C. Full Name (Last, First, Middle Initial) William A. Shiner		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 16 Meadowview Dr.		Transaction ID: C290220
City State Zip Code Northfield IL 60093	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Gary R. Silverman		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 415 E. North Water Apt 3006		Transaction ID: C290150
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Kaye Scholer LLC Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. James Sipkins		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 2748 Bennett Avenue		Transaction ID: C290222
City State Zip Code Evanston IL 60201	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self-Employed Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Paul E. Slater		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address 55 W Monroe		Transaction ID: C290223
City State Zip Code Chicago IL 60603	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Sperling & Slater Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Ellen Stone-Belic Mailing Address 418 W Webster Ave City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290236 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Columbia College Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) David Terman Mailing Address 941 Sheridan Road City Wilmette State IL Zip Code 60091 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290238 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Self-Employed Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Patricia Tullman Mailing Address 1226 Colgate St. City Wilmette State IL Zip Code 60091 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290157 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Self-Employed Diversity Facilitator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 35
	<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	

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NAME OF COMMITTEE (In Full)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Carson P. Veach Mailing Address 1040 Sunset City State Zip Code Winnetka IL 60093 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Transaction ID: C290242 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Vindivine COO Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Douglas Wade Mailing Address 575 Selborne Road City State Zip Code Riverside IL 60546 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 6 Transaction ID: C288688 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Chicago Convention & Tourism Bureau Vice President - Finance Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Edna Wade Mailing Address 575 Selborne Road City State Zip Code Riverside IL FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 6 Transaction ID: C288689 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Komarek School Teacher Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	71800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 35
	(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) Midwest Values PAC

A. Full Name (Last, First, Middle Initial) Progressive Choices	
Mailing Address P.O. Box 58	
City Evanston	State IL
Zip Code 60204	
FEC ID number of contributing federal political committee.	C C00381806
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY 01 / 31 / 2006
Transaction ID: C290214
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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)

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<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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Bannor Photography		Transaction ID: D35702	
Mailing Address 1131 Lake Street #208		Date of Disbursement 01 / 31 / 2006	
City Oak Park	State IL	Zip Code 60301	Amount of Each Disbursement this Period 151.31
Purpose of Disbursement Photography		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Andrew Barr		Transaction ID: D35693	
Mailing Address 1431 W. 27th St.		Date of Disbursement 01 / 18 / 2006	
City Minneapolis	State MN	Zip Code 55408	Amount of Each Disbursement this Period 961.37
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. David Benson		Transaction ID: D35677	
Mailing Address 2151 Grand Ave, #7		Date of Disbursement 01 / 01 / 2006	
City Saint Paul	State MN	Zip Code 55105	Amount of Each Disbursement this Period 1090.25
Purpose of Disbursement Payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2202.93
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)

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<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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. David Benson		Transaction ID: D35685 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6
Mailing Address 2151 Grand Ave, #7		Amount of Each Disbursement this Period 1090.25
City Saint Paul State MN Zip Code 55105	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Blue State Digital, LLC		Transaction ID: D35683 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 6
Mailing Address 1000 Vermont Avenue, NW		Amount of Each Disbursement this Period 332.50
City Washington State DC Zip Code 20005	Purpose of Disbursement Internet Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Capital Accounting Services		Transaction ID: D35679 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 4190 Vinewood Lane, Ste. 111-554		Amount of Each Disbursement this Period 2500.00
City Plymouth State MN Zip Code 55442	Purpose of Disbursement Accounting Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3922.75
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 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)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial) city SALOON		Transaction ID: D35701 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 6
Mailing Address 151 Ohio		Amount of Each Disbursement this Period 1200.00
City Chicago State IL Zip Code 60610	Purpose of Disbursement Food & Beverages/Event Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Dinah Dale Consulting, Inc.		Transaction ID: D35678 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address 131 Burntside Drive		Amount of Each Disbursement this Period 6500.00
City Golden Valley State MN Zip Code 55422	Purpose of Disbursement Consulting - Fundraising Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) East Bank Club Catering		Transaction ID: D35682 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 500 North Kingsbury Street		Amount of Each Disbursement this Period 1031.58
City Chicago State IL Zip Code 60610	Purpose of Disbursement Catering - Event Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	8731.58
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. EFTPS - US Treasury		Transaction ID: D35688 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 6
Mailing Address		Amount of Each Disbursement this Period 751.70
City Washington	State DC	
Purpose of Disbursement Payroll Taxes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Expedia Travel		Transaction ID: D35696 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address 3150 - 139th Ave. SE		Amount of Each Disbursement this Period 304.78
City Bellevue	State WA	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Expedia Travel		Transaction ID: D35697 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address 3150 - 139th Ave. SE		Amount of Each Disbursement this Period 10.00
City Bellevue	State WA	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1066.48

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 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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. MN Department of Economic Security		Transaction ID: D35698 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6
Mailing Address P.o. Box 1705		Amount of Each Disbursement this Period 77.00
City Saint Paul State MN Zip Code 55101	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. MN Department of Revenue		Transaction ID: D35699 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6
Mailing Address Mail Station 1173		Amount of Each Disbursement this Period 144.00
City Saint Paul State MN Zip Code 55146	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Erica Ramis		Transaction ID: D35719 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 6
Mailing Address 1 Northfield PI		Amount of Each Disbursement this Period 4700.00
City Northfield State IL Zip Code 60093	Purpose of Disbursement Food & Event Costs Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶	4921.00
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)

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<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)
Midwest Values PAC

A. Harold Ramis Full Name (Last, First, Middle Initial) Mailing Address 1 Northfield Pl City Northfield State IL Zip Code 60093 Purpose of Disbursement Food & Event Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D35718 Date of Disbursement 01 / 29 / 2006 Amount of Each Disbursement this Period 4700.00 * in-kind received
---	--	---

B. Peggy Shapiro Full Name (Last, First, Middle Initial) Mailing Address 2555 N. Clark St. #206 City Chicago State IL Zip Code 60614 Purpose of Disbursement Graphic Design Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D35717 Date of Disbursement 01 / 29 / 2006 Amount of Each Disbursement this Period 300.00 * in-kind received
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C. United Airlines Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 66100 City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D35694 Date of Disbursement 01 / 25 / 2006 Amount of Each Disbursement this Period 328.61
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SUBTOTAL of Disbursements This Page (optional) ▶	5328.61
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)

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<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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. United Airlines		Transaction ID: D35695 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6	
Mailing Address P.O. Box 66100		Amount of Each Disbursement this Period 328.61	
City Chicago	State IL		Zip Code 60666
Purpose of Disbursement Travel			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. United States Treasury		Transaction ID: D35700 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6	
Mailing Address		Amount of Each Disbursement this Period 21.84	
City Ogden	State UT		Zip Code 84201
Purpose of Disbursement Payroll Taxes			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. US Postmaster		Transaction ID: D35689 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6	
Mailing Address 180 Kellogg Blvd.		Amount of Each Disbursement this Period 78.00	
City Saint Paul	State MN		Zip Code 55101
Purpose of Disbursement Postage			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	428.45
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 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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, N.A.		Transaction ID: D35680 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6
Mailing Address P.O. Box B 514		Amount of Each Disbursement this Period 104.80
City Minneapolis State MN Zip Code 55479	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Wells Fargo Bank, N.A.		Transaction ID: D35681 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address P.O. Box B 514		Amount of Each Disbursement this Period 124.00
City Minneapolis State MN Zip Code 55479	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Wells Fargo Bank, N.A.		Transaction ID: D35686 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address P.O. Box B 514		Amount of Each Disbursement this Period 689.03
City Minneapolis State MN Zip Code 55479	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	917.83
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 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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. Wells Fargo Bank, N.A.		Transaction ID: D35705	
Mailing Address P.O. Box B 514		Date of Disbursement 01 / 30 / 2006	
City Minneapolis	State MN	Zip Code 55479	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement Bank Fees		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Western Insurance Agency		Transaction ID: D35703	
Mailing Address 1740 Rice Street, #200		Date of Disbursement 01 / 31 / 2006	
City Saint Paul	State MN	Zip Code 55113	Amount of Each Disbursement this Period 449.00
Purpose of Disbursement Insurance		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. David Benson		Transaction ID: D35690	
Mailing Address 2151 Grand Ave, #7		Date of Disbursement 01 / 17 / 2006	
City Saint Paul	State MN	Zip Code 55105	Amount of Each Disbursement this Period 195.00
Purpose of Disbursement See Memo Entries		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	649.00
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)

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<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)
Midwest Values PAC

Full Name (Last, First, Middle Initial) A. BCBS of Minnesota		Transaction ID: D35691 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 64676		Amount of Each Disbursement this Period 164.00 [MEMO ITEM]
City Saint Paul State MN Zip Code 55164		
Purpose of Disbursement Insurance Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dawn Frederick		Transaction ID: D35692 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 6
Mailing Address 2151 Grand Ave.		Amount of Each Disbursement this Period 31.00 [MEMO ITEM]
City Saint Paul State MN Zip Code 55105		
Purpose of Disbursement Internet Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	28168.63

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)
Midwest Values PAC

Full Name (Last, First, Middle Initial)

A. Washington State Democratic Central Committee

Mailing Address P.O. Box 4027

City State Zip Code
Seattle WA 98194

Purpose of Disbursement
Contribution - Federal Account

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D35684

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

**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)

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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 checked="" 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)
Midwest Values PAC

A. Full Name (Last, First, Middle Initial)
Heidi Massey

Mailing Address 1226 Eastwood Avenue

City Highland Park State IL Zip Code 60035

Purpose of Disbursement Refund Contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: D35704

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)