

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CITIZENS FOR RUSH

ADDRESS (number and street)

P. O. Box 7292

Check if different than previously reported. (ACC)

CHICAGO

IL

60680-7292

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00257121

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IL

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M / 01 /

D D / 01 /

Y Y Y Y 2022

through

M M / 03 /

D D / 31 /

Y Y Y Y 2022

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

SZYDELKO, JANET, , ,

Type or Print Name of Treasurer

Signature of Treasurer

SZYDELKO, JANET, , ,

[Electronically Filed]

Date

M M / 04 /

D D / 15 /

Y Y Y Y 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
CITIZENS FOR RUSH

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	237992.81
(b) Total Contribution Refunds (from Line 20(d))	2500.00	6000.09
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 2500.00	231992.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31181.49	169119.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2307.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	31181.49	166811.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	112000.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	25589.43	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

CITIZENS FOR RUSH

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	38500.00
(ii) Unitemized.....	0.00	1242.80
(iii) TOTAL of contributions from individuals ▶	0.00	39742.80
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	198250.01
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	237992.81
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2307.90
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	240300.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 29

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31181.49	169119.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	5500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	6000.09
21. OTHER DISBURSEMENTS	50800.00	70557.78
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	84481.49	245677.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	196481.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	196481.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84481.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	112000.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. ALARM DETECTION SYSTEMS, INC.		Date of Disbursement
Mailing Address 1111 Church Road		M M / D D / Y Y Y Y 03 / 02 / 2022
City Aurora	State IL	Zip Code 60505
Purpose of Disbursement OFFICE ALARM		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 630.06
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) ▼	Transaction ID : SB17.22283
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. ALLSTATE INSURANCE COMPANY		Date of Disbursement
Mailing Address 2775 SANDERS ROAD		M M / D D / Y Y Y Y 01 / 31 / 2022
City NORTHBROOK	State IL	Zip Code 60062
Purpose of Disbursement INSURANCE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 220.83
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) ▼	Transaction ID : SB17.22280
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. ALLSTATE INSURANCE COMPANY		Date of Disbursement
Mailing Address 2775 SANDERS ROAD		M M / D D / Y Y Y Y 03 / 03 / 2022
City NORTHBROOK	State IL	Zip Code 60062
Purpose of Disbursement INSURANCE		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 220.83
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) ▼	Transaction ID : SB17.22281
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1071.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. ALLSTATE INSURANCE COMPANY			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2022		
Mailing Address 2775 SANDERS ROAD			FEC Identification Number C		
City NORTHBROOK	State IL	Zip Code 60062	Amount of Each Disbursement this Period 220.83		
Purpose of Disbursement INSURANCE		Category/Type	Transaction ID : SB17.22282		
Candidate Name		<input type="checkbox"/> Memo Item			
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. AT&T MOBILITY			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2022		
Mailing Address P.O. BOX 6463			FEC Identification Number C		
City CAROL STREAM	State IL	Zip Code 60197	Amount of Each Disbursement this Period 174.52		
Purpose of Disbursement OFFICE PHONE		Category/Type	Transaction ID : SB17.22277		
Candidate Name		<input type="checkbox"/> Memo Item			
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. AT&T MOBILITY			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2022		
Mailing Address P.O. BOX 6463			FEC Identification Number C		
City CAROL STREAM	State IL	Zip Code 60197	Amount of Each Disbursement this Period 174.52		
Purpose of Disbursement OFFICE PHONE		Category/Type	Transaction ID : SB17.22278		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	569.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2022
Mailing Address P.O. BOX 6463		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement OFFICE PHONE		Amount of Each Disbursement this Period 174.46
Candidate Name		Transaction ID : SB17.22279
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2022
Mailing Address 201 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		Transaction ID : SB17.22234
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2022
Mailing Address 201 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		Transaction ID : SB17.22235
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	204.46
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2022
Mailing Address 201 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 15.00
Candidate Name		Transaction ID : SB17.22236
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CARUSO FLORIST		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2022
Mailing Address 1717 M STREET NW		FEC Identification Number C
City CHICAGO	State IL	Zip Code 20036
Purpose of Disbursement GIFTS		Amount of Each Disbursement this Period 974.43
Candidate Name		Transaction ID : SB17.22254
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. COMPLIANCE STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2022
Mailing Address 6 E STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE SERVICES		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.22237
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1989.43
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. COMPLIANCE STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2022
Mailing Address 6 E STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE SERVICES		Amount of Each Disbursement this Period 1018.35
Candidate Name		Transaction ID : SB17.22238
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. COMPLIANCE STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2022
Mailing Address 6 E STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE SERVICES		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.22239
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CUBESMART		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2022
Mailing Address 407 EAST 25TH STREET		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60616
Purpose of Disbursement OFFICE STORAGE		Amount of Each Disbursement this Period 545.00
Candidate Name		Transaction ID : SB17.22263
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2563.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. CUBESMART			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2022		
Mailing Address 407 EAST 25TH STREET			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60616	Amount of Each Disbursement this Period 276.00		
Purpose of Disbursement OFFICE STORAGE		Category/ Type	Transaction ID : SB17.22264		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CUBESMART			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2022		
Mailing Address 407 EAST 25TH STREET			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60616	Amount of Each Disbursement this Period 545.00		
Purpose of Disbursement OFFICE STORAGE		Category/ Type	Transaction ID : SB17.22265		
Candidate Name		<input type="checkbox"/> Memo Item			
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. CUBESMART			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2022		
Mailing Address 407 EAST 25TH STREET			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60616	Amount of Each Disbursement this Period 276.00		
Purpose of Disbursement OFFICE STORAGE		Category/ Type	Transaction ID : SB17.22266		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	1097.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. CUBESMART			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2022	
Mailing Address 407 EAST 25TH STREET			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60616	Amount of Each Disbursement this Period 545.00	
Purpose of Disbursement OFFICE STORAGE		Category/Type	Transaction ID : SB17.22267	
Candidate Name		Memo Item <input type="checkbox"/>		
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. CUBESMART			Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2022	
Mailing Address 407 EAST 25TH STREET			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60616	Amount of Each Disbursement this Period 276.00	
Purpose of Disbursement OFFICE STORAGE		Category/Type	Transaction ID : SB17.22268	
Candidate Name		Memo Item <input type="checkbox"/>		
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. HOLLOWAY, PAULETTE, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2022	
Mailing Address 3534 S. CALUMET AVE.			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60653	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement ACCOUNTING SERVICES		Category/Type	Transaction ID : SB17.22243	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1421.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. HOLLOWAY, PAULETTE, , ,			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2022	
Mailing Address 3534 S. CALUMET AVE.			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60653	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type	Transaction ID : SB17.22244	
Candidate Name		<input type="checkbox"/> Memo Item		
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. HOLLOWAY, PAULETTE, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2022	
Mailing Address 3534 S. CALUMET AVE.			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60653	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type	Transaction ID : SB17.22245	
Candidate Name		<input type="checkbox"/> Memo Item		
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. HP INSTANT INK			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2022	
Mailing Address 3000 HANOVER STREET			FEC Identification Number C	
City PALO ALTO	State CA	Zip Code 94304	Amount of Each Disbursement this Period 12.86	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.22270	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	1212.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. HP INSTANT INK			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2022	
Mailing Address 3000 HANOVER STREET			FEC Identification Number C	
City PALO ALTO	State CA	Zip Code 94304	Amount of Each Disbursement this Period 808.94	
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.22271	
Candidate Name		<input type="checkbox"/> Memo Item		
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. HYATT REGENCY WASHINGTON			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2022	
Mailing Address 400 NEW JERSEY AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 593.14	
Purpose of Disbursement TRAVEL		Category/ Type	Transaction ID : SB17.22261	
Candidate Name		<input type="checkbox"/> Memo Item		
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. LAURIOL PLAZA			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2022	
Mailing Address 1835 18TH ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20009	Amount of Each Disbursement this Period 202.94	
Purpose of Disbursement FOOD		Category/ Type	Transaction ID : SB17.22293	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	808.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. MAVROMATIS, DOTTI, , ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2022
Mailing Address 6 E STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING SERVICES		Amount of Each Disbursement this Period 4000.00
Candidate Name		Transaction ID : SB17.22240
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. MAVROMATIS, DOTTI, , ,		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2022
Mailing Address 6 E STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING SERVICES		Amount of Each Disbursement this Period 4000.00
Candidate Name		Transaction ID : SB17.22242
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. NATIONAL DEMOCRATIC CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2022
Mailing Address 30 IVY STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement DUES		Amount of Each Disbursement this Period 120.00
Candidate Name		Transaction ID : SB17.22251
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	8120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. NATIONAL DEMOCRATIC CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2022	
Mailing Address 30 IVY STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 955.10	
Purpose of Disbursement FOOD		Category/ Type	Transaction ID : SB17.22252	
Candidate Name		<input type="checkbox"/> Memo Item		
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. NATIONAL DEMOCRATIC CLUB			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2022	
Mailing Address 30 IVY STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 128.11	
Purpose of Disbursement FOOD		Category/ Type	Transaction ID : SB17.22253	
Candidate Name		<input type="checkbox"/> Memo Item		
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. NUMERO, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2022	
Mailing Address 26895 ALISO CREEK ROAD #B-795			FEC Identification Number C	
City ALISO NIEJO	State CA	Zip Code 92656	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement DATABASE		Category/ Type	Transaction ID : SB17.22248	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	1433.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. NUMERO, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2022
Mailing Address 26895 ALISO CREEK ROAD #B-795		FEC Identification Number C
City ALISO NIEJO	State CA	Zip Code 92656
Purpose of Disbursement DATABASE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 350.00	
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) ▼	Transaction ID : SB17.22249
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. NUMERO, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2022
Mailing Address 26895 ALISO CREEK ROAD #B-795		FEC Identification Number C
City ALISO NIEJO	State CA	Zip Code 92656
Purpose of Disbursement DATABASE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 350.00	
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) ▼	Transaction ID : SB17.22250
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PROGRESS PRINTING CORP		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2022
Mailing Address 3324 S. HALSTED		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60600
Purpose of Disbursement PRINTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 225.00	
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) ▼	Transaction ID : SB17.22274
State: District:	<input type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. PROGRESS PRINTING CORP			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2022	
Mailing Address 3324 S. HALSTED			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60600	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement PRINTING		Category/Type	Transaction ID : SB17.22275	
Candidate Name		Memo Item <input type="checkbox"/>		
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. SCOTT B. ERDMAN			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2022	
Mailing Address 8 S MICHIGAN AVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60603	Amount of Each Disbursement this Period 6000.00	
Purpose of Disbursement LEGAL SERVICES		Category/Type	Transaction ID : SB17.22295	
Candidate Name		Memo Item <input type="checkbox"/>		
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. SOUND OF AUTHORITY, INC			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2022	
Mailing Address 5410 WEST ROOSEVELT RD			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60644	Amount of Each Disbursement this Period 2375.00	
Purpose of Disbursement MEDIA PRODUCTION		Category/Type	Transaction ID : SB17.22246	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	8425.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. TRUTH ITALIAN RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2022	
Mailing Address 56 E PERSHING ROAD			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60653	Amount of Each Disbursement this Period 484.59	
Purpose of Disbursement FOOD FOR EVENT		Category/Type	Transaction ID : SB17.22259	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2022	
Mailing Address 233 SOUTH WACKER DRIVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 494.20	
Purpose of Disbursement TRAVEL		Category/Type	Transaction ID : SB17.22262	
Candidate Name		Memo Item <input type="checkbox"/>		
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. USPS			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2022	
Mailing Address 233 S WACKER DR			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 198.00	
Purpose of Disbursement PO BOX RENEWAL		Category/Type	Transaction ID : SB17.22272	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1176.79
TOTAL This Period (last page this line number only).....▶	31018.63

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2022
	Mailing Address 25 MASSACHUSETTS AVENUE, NW, SUITE			FEC Identification Number C C00413955
City WASHINGTON		State DC	Zip Code 20001	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONTRIBUTION REFUND			Category/ Type	Transaction ID : SB20C.22257
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) ▼		<input type="checkbox"/> Memo Item
State:	District:			

B.	Full Name (Last, First, Middle Initial)			Date of Disbursement M M / D D / Y Y Y Y
	Mailing Address			FEC Identification Number C
City		State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			Category/ Type	<input type="checkbox"/> Memo Item
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:			

C.	Full Name (Last, First, Middle Initial)			Date of Disbursement M M / D D / Y Y Y Y
	Mailing Address			FEC Identification Number C
City		State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement			Category/ Type	<input type="checkbox"/> Memo Item
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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 29			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. CHRISTIAN WOMEN'S EXPO INTERNATIONAL			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2022		
Mailing Address BEST EFFORTS			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60600	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement DONATION		Category/Type	Transaction ID : SB21.22286		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CITIZENS TO ELECT FLYNN RUSH			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2022		
Mailing Address 1153 East Hyde Park Blvd			FEC Identification Number C		
City Chicago	State IL	Zip Code 60615	Amount of Each Disbursement this Period 11000.00		
Purpose of Disbursement CONTRIBUTION		Category/Type	Transaction ID : SB21.22288		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CITIZENS TO ELECT FLYNN RUSH			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2022		
Mailing Address 1153 East Hyde Park Blvd			FEC Identification Number C		
City Chicago	State IL	Zip Code 60615	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement CONTRIBUTION		Category/Type	Transaction ID : SB21.22289		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	13500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 29			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. CITIZENS TO ELECT FLYNN RUSH			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2022		
Mailing Address 1153 East Hyde Park Blvd			FEC Identification Number C		
City Chicago	State IL	Zip Code 60615	Amount of Each Disbursement this Period 10500.00		
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22290		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CITIZENS TO ELECT FLYNN RUSH			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2022		
Mailing Address 1153 East Hyde Park Blvd			FEC Identification Number C		
City Chicago	State IL	Zip Code 60615	Amount of Each Disbursement this Period 2300.00		
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22291		
Candidate Name		Memo Item <input type="checkbox"/>			
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. CITIZENS TO ELECT FLYNN RUSH			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2022		
Mailing Address 1153 East Hyde Park Blvd			FEC Identification Number C		
City Chicago	State IL	Zip Code 60615	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22292		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	14300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. FRIENDS OF BOBBY RUSH			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2022	
Mailing Address P.O. BOX 7292			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60680-7292	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22284	
Candidate Name		<input type="checkbox"/> Memo Item		
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. FRIENDS OF BOBBY RUSH			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2022	
Mailing Address P.O. BOX 7292			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60680-7292	Amount of Each Disbursement this Period 20000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22285	
Candidate Name		<input type="checkbox"/> Memo Item		
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. FRIENDS OF KARIN			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2022	
Mailing Address 8232 WABASH AVE			FEC Identification Number C C00799544	
City CHICAGO	State IL	Zip Code 60619	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : SB21.22297	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IL District: 01				

SUBTOTAL of Disbursements This Page (optional).....▶	23000.00
TOTAL This Period (last page this line number only).....▶	50800.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amber, Inn			Nature of Debt (Purpose): Space Rental
Mailing Address 3901 S. Michigan Avenue			
City Chicago	State IL	Zip Code 60653	

Outstanding Balance Beginning This Period <input type="text" value="1300.00"/>	Transaction ID : SD10.2928	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1300.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Apostolic Faith Church			Nature of Debt (Purpose): Refund
Mailing Address 3823 S. Indiana Ave.			
City Chicago	State IL	Zip Code 60653	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	Transaction ID : SD10.457	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T			Nature of Debt (Purpose): LONG DISTANCE
Mailing Address Bill Payment Center			
City Chicago	State IL	Zip Code 60600	

Outstanding Balance Beginning This Period <input type="text" value="1318.61"/>	Transaction ID : SD10.2909	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1318.61"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3118.61"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bloomenthal, Leah, , ,			Nature of Debt (Purpose): Office Supplies
Mailing Address 6325 N. Sheridan			
City Chicago	State IL	Zip Code 60647	

Outstanding Balance Beginning This Period <input type="text" value="62.40"/>		Transaction ID : SD10.458	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="62.40"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chubb Group Insurance Companies			Nature of Debt (Purpose): Insurance
Mailing Address 30 N. LaSalle Suite 3510			
City Chicago	State IL	Zip Code 60602	

Outstanding Balance Beginning This Period <input type="text" value="1910.00"/>		Transaction ID : SD10.2924	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1910.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Citizens for Gary Lapille			Nature of Debt (Purpose): Refund
Mailing Address P.O. Box 64665			
City Chicago	State IL	Zip Code 60664-1664	

Outstanding Balance Beginning This Period <input type="text" value="2000.00"/>		Transaction ID : SD10.459	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3972.40"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ComEd			Nature of Debt (Purpose): Electricity
Mailing Address Bill Payment Center			
City Chicago	State IL	Zip Code 60600	

Outstanding Balance Beginning This Period		Transaction ID : SD10.8787	
9.96			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	9.96	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FRIENDS OF BOBBY RUSH			Nature of Debt (Purpose): Estimated Debt for Space usage. Actual amount To Be Determined'
Mailing Address P.O. BOX 7292			
City CHICAGO	State IL	Zip Code 60680-7292	

Outstanding Balance Beginning This Period		Transaction ID : SD10.16392	
2100.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2100.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grainger Terry, Inc.			Nature of Debt (Purpose): Printing & Mailing
Mailing Address 1965 W. Pershing Road Building A, 3rd Floor			
City Chicago	State IL	Zip Code 60609	

Outstanding Balance Beginning This Period		Transaction ID : SD10.11451	
6890.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	6890.00	

1) SUBTOTALS This Period This Page (optional)	8999.96
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodges, Charisse, , ,			Nature of Debt (Purpose): Salary
Mailing Address 3348 S. Giles Ave.			
City Chicago	State IL	Zip Code 60616	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="850.00"/>		Transaction ID : SD10.460	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="850.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Biery Communications			Nature of Debt (Purpose): Public Relations Fee
Mailing Address 435 W. Wisconsin			
City Chicago	State IL	Zip Code 60614	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="1000.00"/>		Transaction ID : SD10.461	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="1000.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lori Ann Bass & Associates			Nature of Debt (Purpose): Fundraising Fee
Mailing Address 730 N. Franklin			
City Chicago	State IL	Zip Code 60611	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="94.54"/>		Transaction ID : SD10.462	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="94.54"/>	

1) SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="1944.54"/>
2) TOTALS This Period (last page this line number only)	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McCoy, Gil N., , ,			Nature of Debt (Purpose): Refund
Mailing Address 5210 S. Blackstone			
City Chicago	State IL	Zip Code 60615	

Outstanding Balance Beginning This Period 1000.00		Transaction ID : SD10.451	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor People's Energy			Nature of Debt (Purpose): Heating Fuel
Mailing Address Bill Payment Center			
City Chicago	State IL	Zip Code 60600	

Outstanding Balance Beginning This Period 1403.92		Transaction ID : SD10.8788	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1403.92	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Progressive Land Developers			Nature of Debt (Purpose): Office Rent
Mailing Address 7801 S. Cottage Grove			
City Chicago	State IL	Zip Code 60619	

Outstanding Balance Beginning This Period 1400.00		Transaction ID : SD10.452	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1400.00	

1) SUBTOTALS This Period This Page (optional)	▶	3803.92
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trib-Co Construction			Nature of Debt (Purpose): Refund
Mailing Address 500 West Monroe			
City Chicago	State IL	Zip Code 60661	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="300.00"/>	Transaction ID : SD10.453
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="300.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trilla Stell Drum Corp.			Nature of Debt (Purpose): Refund
Mailing Address 2959 West 47th Street			
City Chicago	State IL	Zip Code 60632	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="200.00"/>	Transaction ID : SD10.454
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="200.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vision, Health Mgmt Systems			Nature of Debt (Purpose): REfund
Mailing Address 2838 S. Indiana			
City Chicago	State IL	Zip Code 60616	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="250.00"/>	Transaction ID : SD10.455
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="250.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="750.00"/>
2) TOTALS This Period (last page this line number only)	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Wright, Robert, , ,			Nature of Debt (Purpose): Salary
Mailing Address 1212 S. Michigan			
City Chicago	State IL	Zip Code 60609	

Outstanding Balance Beginning This Period		Transaction ID : SD10.456	
3000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)	3000.00
2) TOTALS This Period (last page this line number only)	25589.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	25589.43