

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Roskam for Congress Committee

ADDRESS (number and street) P, O, Box 713  
 Check if different than previously reported. (ACC)  
Wheaton IL 60187

2. **FEC IDENTIFICATION NUMBER** C00410969  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
IL 06

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 01 01 2009 through 03 31 2009

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 Nancy H. Watkins

Signature of Treasurer Electronically Filed by Nancy H. Watkins Date 04 14 2009

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

Roskam for Congress Committee

Report Covering the Period:

From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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)).....	220268.74	232783.74
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	220268.74	227033.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	102418.58	235349.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	19.50	594.94
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	102399.08	234755.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	158096.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	52389.84	

**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  
Roskam for Congress Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

**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).....

106400.00

115200.00

(ii) Unitemized.....

30437.00

31152.00

(iii) TOTAL of contributions

136837.00

146352.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

83431.74

86431.74

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

220268.74

232783.74

(add Lines 11(a)(iii), (b), (c), and (d))

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

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

19.50

594.94

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

16.73

127.78

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

220304.97

233506.46

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	102418.58	235349.98
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	4750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5750.00
21. OTHER DISBURSEMENTS.....	1350.00	1350.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	103768.58	242449.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	41559.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	220304.97
25. SUBTOTAL (add Line 23 and Line 24).....	261864.90
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103768.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	158096.32

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Abbott Laboratories PAC  
Mailing Address 100 Abbott Park Road  
City North Chicago State IL Zip Code 60064-3502  
FEC ID number of contributing federal political committee. **C** C00040279  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 9  
**Transaction ID:** 90408.C20094  
Amount of Each Receipt this Period 2500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Accenture PAC  
Mailing Address 800 Connecticut Ave., N.W., #600  
City Washington State DC Zip Code 20006  
FEC ID number of contributing federal political committee. **C** C00300707  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 9  
**Transaction ID:** 90402.C19930  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Amer. Society of Anesthesiologists PAC  
Mailing Address 520 N. Northwest Highway  
City Park Ridge State IL Zip Code 60068-2538  
FEC ID number of contributing federal political committee. **C** C00255752  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 9  
**Transaction ID:** 90402.C19617  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 4500.00  
**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 97
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Airlines PAC Mailing Address 1101 17th Street, N.W., #600 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00107300 Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: 90402.C19514 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	2	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	0	2	/	2	0	0	9														
1000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) American Bankers Assoc. PAC Mailing Address 1120 Connecticut Ave., N.W. City Washington State DC Zip Code 20036-3905 FEC ID number of contributing federal political committee. <b>C</b> C00004275 Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: 90402.C19776 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	8	/	2	0	0	9	2000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	1	8	/	2	0	0	9														
2000.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) American Council of Engineering PAC Mailing Address 1015 15th Street, N.W., #802 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00010868 Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: 90408.C20093 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	1	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	3	1	/	2	0	0	9														
1000.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
American Council of Life Insurers PAC  
Mailing Address 101 Constitution Ave., N.W., #700  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00147066  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 130.84  
Date of Receipt 02 / 04 / 2009  
Transaction ID: 90305.C19458  
Amount of Each Receipt this Period 130.84  
In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
meeting expenses

**B.** Full Name (Last, First, Middle Initial)  
American Council of Life Insurers PAC  
Mailing Address 101 Constitution Ave., N.W., #700  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00147066  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1130.84  
Date of Receipt 02 / 09 / 2009  
Transaction ID: 90305.C19456  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Association PAC  
Mailing Address 325 7th Street, N.W.  
City Washington State DC Zip Code 20004-2818  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 02 / 09 / 2009  
Transaction ID: 90305.C19454  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2130.84  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 97
(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
American Society of Assn. Executives PAC

Mailing Address 1575 I Street, N.W.

City Washington State DC Zip Code 20005-1109

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 01 / 26 / 2009  
**Transaction ID:** 90305.C18842  
 Amount of Each Receipt this Period: 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
AT&T, Inc. Federal PAC

Mailing Address 208 S. Akard Street, #3521

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 23 / 2009  
**Transaction ID:** 90402.C19798  
 Amount of Each Receipt this Period: 2500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Baxter Healthcare Corp. PAC

Mailing Address 1501 K Street, N.W., #375

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00117838

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 09 / 2009  
**Transaction ID:** 90402.C19610  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Blue Cross Blue Shield Assn. PAC  
Mailing Address 1310 G Street, N.W.  
City State Zip Code  
Washington DC 20005  
FEC ID number of contributing federal political committee. **C** C00194746  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 27 / 2009  
Transaction ID: 90402.C19931  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Boeing Political Action Committee  
Mailing Address 1200 Wilson Blvd.  
City State Zip Code  
Arlington VA 22209  
FEC ID number of contributing federal political committee. **C** C00142711  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 13 / 2009  
Transaction ID: 90402.C19619  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Boeing Political Action Committee  
Mailing Address 1200 Wilson Blvd.  
City State Zip Code  
Arlington VA 22209  
FEC ID number of contributing federal political committee. **C** C00142711  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2009  
Transaction ID: 90408.C20132  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Bridgestone Americas, Inc. PAC  
 Mailing Address 607 14th Street, N.W., #500  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00371948  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 03 / 18 / 2009  
**Transaction ID:** 90402.C19775  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bryan Cave LLP Political Fund  
 Mailing Address 700 13th Street, N.W. , #700  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00332643  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 03 / 30 / 2009  
**Transaction ID:** 90408.C20129  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
CME Group, Inc. PAC  
 Mailing Address 20 S. Wacker Drive  
 City Chicago State IL Zip Code 60606-7408  
 FEC ID number of contributing federal political committee. **C** C00076299  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00  
 Date of Receipt M M / D D / Y Y Y Y Y  
 03 / 09 / 2009  
**Transaction ID:** 90402.C19612  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 11 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
CME Group, Inc. PAC

Mailing Address 20 S. Wacker Drive

City State Zip Code  
Chicago IL 60606-7408

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 9

**Transaction ID:** 90402.C20053

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
ConocoPhillips Spirit PAC

Mailing Address 1400-B Plaza Office Building

City State Zip Code  
Bartlesville OK 74004-0001

FEC ID number of contributing federal political committee. **C** C00112896

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 9

**Transaction ID:** 90402.C19623

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Conservative Victory Fund

Mailing Address 1101 Pennsylvania Ave., S.E., #201

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 418.70

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 7 / 2 0 0 9

**Transaction ID:** 90305.C19319

Amount of Each Receipt this Period  
418.70

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2918.70**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave., N.W., #600  
South Buliding

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2009  
**Transaction ID:** 90402.C19607  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
CVS/Caremark Corporation Employees PAC

Mailing Address 1300 I Street, N.W., #525-W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2009  
**Transaction ID:** 90402.C19609  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Davita, Inc. PAC

Mailing Address 601 Hawaii Street

City El Segundo State CA Zip Code 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 23 / 2009  
**Transaction ID:** 90402.C19800  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Dykema Gossett Federal PAC

Mailing Address 201 Townsend Street, #900

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 0 5 / 2 0 0 9

**Transaction ID:** 90126.C20895

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Eagle Forum PAC

Mailing Address P. O. Box 618

City State Zip Code  
Alton IL 62002-0618

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 9 / 2 0 0 9

**Transaction ID:** 90305.C19453

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Electrical Construction PAC

Mailing Address 3 Bethesda Metro Center, #1100

City State Zip Code  
Bethesda MD 20814-5330

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 9

**Transaction ID:** 90402.C19622

Amount of Each Receipt this Period  
2500.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 97

(check only one)

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

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)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Engineers Polical Education PAC

Mailing Address 1125 17th Street, N.W.

City State Zip Code  
Washington DC 20036-4707

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2009

Transaction ID: 90408.C20123

Amount of Each Receipt this Period

5000.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Engineers Polical Education PAC

Mailing Address 1125 17th Street, N.W.

City State Zip Code  
Washington DC 20036-4707

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2009

Transaction ID: 90408.C20124

Amount of Each Receipt this Period

5000.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
ESOP Association PAC

Mailing Address 1726 M Street, N.W., #501

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 12 / 2009

Transaction ID: 90126.C20898

Amount of Each Receipt this Period

1000.00

Receipt

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

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

11000.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
ESOP Association PAC  
Mailing Address 1726 M Street, N.W., #501  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00196089  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 02 / 09 / 2009  
Transaction ID: 90305.C19457  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ESOP Association PAC  
Mailing Address 1726 M Street, N.W., #501  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00196089  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00  
Date of Receipt 03 / 26 / 2009  
Transaction ID: 90402.C19901  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Express Scripts, Inc. Political Fund  
Mailing Address 1 Express Way  
City St. Louis State MO Zip Code 63121  
FEC ID number of contributing federal political committee. **C** C00365072  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 13 / 2009  
Transaction ID: 90402.C19620  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 97  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

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

Mailing Address 1001 Pennsylvania Avenue, N.W., #5

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 09 / 2009

Transaction ID: 90305.C19455

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
FMR LLC Political Action Committee

Mailing Address 82 Devonshire Street

City State Zip Code  
Boston MA 02109

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 02 / 2009

Transaction ID: 90402.C19513

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
HearPAC of Hearing Industries Assoc.

Mailing Address 1444 I Street, N.W. #700

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00437798

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 12 / 2009

Transaction ID: 90402.C19618

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC  
Mailing Address 101 Constitution Avenue, N.W., #50  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00096156  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 02 / 27 / 2009  
Transaction ID: 90305.C19507  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC  
Mailing Address 101 Constitution Avenue, N.W., #50  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00096156  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 3000.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90408.C20131  
Amount of Each Receipt this Period 2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Independent Insurance Agents PAC  
Mailing Address 412 1st Street, S.E., #300  
City Washington State DC Zip Code 20003-1804  
FEC ID number of contributing federal political committee. **C** C00022343  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 23 / 2009  
Transaction ID: 90402.C19797  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
International Paper PAC

Mailing Address 1101 Pennsylvania Ave., N.W., #200

City State Zip Code  
Washington DC 20004-2514

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2009

Transaction ID: 90402.C19777

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Intl. Council of Shopping Centers PAC

Mailing Address 1399 New York Avenue, #720

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 16 / 2009

Transaction ID: 90402.C19621

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
Investment Company Institute PAC

Mailing Address 1401 H Street, N.W., #1200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2009

Transaction ID: 90305.C19451

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 97
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Investment Company Institute PAC		Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 1401 H Street, N.W., #1200		Transaction ID: 90402.C19608
	City Washington	State DC	Zip Code 20005
	FEC ID number of contributing federal political committee. <b>C</b> C00105981		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Koch Industries, Inc. PAC		Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 655 15th Street, N.W., #445		Transaction ID: 90402.C19613
	City Washington	State DC	Zip Code 20005-5701
	FEC ID number of contributing federal political committee. <b>C</b> C00236489		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) KPMG Partners & Employees PAC		Date of Receipt MM / DD / YYYY 02 / 04 / 2009
	Mailing Address P. O. Box 18254		Transaction ID: 90305.C19396
	City Washington	State DC	Zip Code 20036
	FEC ID number of contributing federal political committee. <b>C</b> C00280222		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Massachusetts Mutual Life Ins. Co. PAC  
Mailing Address 1295 State Street

City State Zip Code  
Springfield IL 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 09 / 2009

**Transaction ID:** 90402.C19615

Amount of Each Receipt this Period  
2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
MasterCard International, Inc. PAC  
Mailing Address 2000 Purchase Street

City State Zip Code  
Purchase NY 10577

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 02 / 2009

**Transaction ID:** 90402.C19511

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Metlife, Inc. Employees PAC  
Mailing Address 1095 Avenue of the Americas, #4D

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2009

**Transaction ID:** 90402.C19892

Amount of Each Receipt this Period  
1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mortgage Bankers Association PAC  
Mailing Address 1919 Pennsylvania Ave., N.W.  
City Washington State DC Zip Code 20006-3400  
FEC ID number of contributing federal political committee. **C** C00004812  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90408.C20125  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC  
Mailing Address 430 N. Michigan Avenue  
City Chicago State IL Zip Code 60611-4011  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90408.C20126  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Assoc. PAC  
Mailing Address 1100 King Street, #600  
City Alexandria State VA Zip Code 22314-2925  
FEC ID number of contributing federal political committee. **C** C00144766  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 03 / 10 / 2009  
Transaction ID: 90402.C19616  
Amount of Each Receipt this Period 2500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
National Multi Housing Council PAC  
Mailing Address 1850 M Street, N.W., #540

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 02 / 09 / 2009  
**Transaction ID:** 90305.C19452  
 Amount of Each Receipt this Period 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
National Venture Capital Assn. PAC  
Mailing Address 1655 Fort Myer Drive, #850

City Arlington State VA Zip Code 22209-3199

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 03 / 30 / 2009  
**Transaction ID:** 90408.C20128  
 Amount of Each Receipt this Period 1500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Natl. Air Traffic Controllers Assoc. PAC  
Mailing Address 1325 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 02 / 2009  
**Transaction ID:** 90402.C19515  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
New York Life Insurance PAC  
Mailing Address 51 Madison Avenue, #1109  
City New York State NY Zip Code 10010  
FEC ID number of contributing federal political committee. **C** C00158881  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 03 / 02 / 2009  
Transaction ID: 90402.C19512  
Amount of Each Receipt this Period: 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
New York Life Insurance PAC  
Mailing Address 51 Madison Avenue, #1109  
City New York State NY Zip Code 10010  
FEC ID number of contributing federal political committee. **C** C00158881  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 03 / 30 / 2009  
Transaction ID: 90408.C20130  
Amount of Each Receipt this Period: 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
NICOR, Inc. PAC  
Mailing Address 1844 Ferry Road  
City Naperville State IL Zip Code 60563  
FEC ID number of contributing federal political committee. **C** C00164970  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt: 03 / 30 / 2009  
Transaction ID: 90408.C20127  
Amount of Each Receipt this Period: 2500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
NYSE Group, Inc. PAC

Mailing Address 801 Pennsylvania Avenue, N.W., #63

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00402974

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 26 / 2009  
**Transaction ID:** 90402.C19895  
 Amount of Each Receipt this Period: 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Philips Electronics North America PAC

Mailing Address 1300 I Street, N.W., #1070-E

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00239780

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 02 / 27 / 2009  
**Transaction ID:** 90305.C19508  
 Amount of Each Receipt this Period: 500.00

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

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

Mailing Address 1301 K Street, N.W.

City Washington State DC Zip Code 20005-7002

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 17 / 2009  
**Transaction ID:** 90402.C19740  
 Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
United Parcel Service, Inc. PAC  
 Mailing Address 55 Glenlake Parkway, N.E.  
 City Atlanta State GA Zip Code 30328-3474  
 FEC ID number of contributing federal political committee. **C** C00064766  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 75.00  
 Date of Receipt 02 / 25 / 2009  
**Transaction ID:** 90408.C20090  
 Amount of Each Receipt this Period 75.00  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 catering

**B.** Full Name (Last, First, Middle Initial)  
United Parcel Service, Inc. PAC  
 Mailing Address 55 Glenlake Parkway, N.E.  
 City Atlanta State GA Zip Code 30328-3474  
 FEC ID number of contributing federal political committee. **C** C00064766  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 275.00  
 Date of Receipt 02 / 25 / 2009  
**Transaction ID:** 90408.C20089  
 Amount of Each Receipt this Period 200.00  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 facility rental

**C.** Full Name (Last, First, Middle Initial)  
United Parcel Service, Inc. PAC  
 Mailing Address 55 Glenlake Parkway, N.E.  
 City Atlanta State GA Zip Code 30328-3474  
 FEC ID number of contributing federal political committee. **C** C00064766  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 715.00  
 Date of Receipt 03 / 06 / 2009  
**Transaction ID:** 90408.C20091  
 Amount of Each Receipt this Period 440.00  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 catering

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **715.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 26 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
United Parcel Service, Inc. PAC

Mailing Address 55 Glenlake Parkway, N.E.

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 882.20

Date of Receipt 03 / 06 / 2009  
**Transaction ID:** 90408.C20092  
 Amount of Each Receipt this Period 167.20

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

**B.** Full Name (Last, First, Middle Initial)  
USAA Employee PAC

Mailing Address 9800 Fredericksburg Road, #501

City San Antonio State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 03 / 23 / 2009  
**Transaction ID:** 90402.C19799  
 Amount of Each Receipt this Period 2500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Wellpoint, Inc. PAC

Mailing Address 120 Monument Circle

City Indianapolis State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 03 / 09 / 2009  
**Transaction ID:** 90402.C19611  
 Amount of Each Receipt this Period 2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5167.20

**TOTAL** This Period (last page this line number only) ..... ► 83431.74

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Pete Anast

Mailing Address 564 S. Arlington Avenue

City State Zip Code  
Elmhurst IL 60126

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2009  
**Transaction ID:** 90402.C19728  
 Amount of Each Receipt this Period 250.00

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

**B.** Full Name (Last, First, Middle Initial)  
James D. Anderson

Mailing Address 26W065 Embden Lane

City State Zip Code  
Wheaton IL 60187-7909

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 23 / 2009  
**Transaction ID:** 90402.C19817  
 Amount of Each Receipt this Period 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Terry B. Arch

Mailing Address 1011 Penny Lane

City State Zip Code  
Wheaton IL 60187-6254

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 10 / 2009  
**Transaction ID:** 90402.C19564  
 Amount of Each Receipt this Period 2400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 3650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 97  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sarah R. Bamford

Mailing Address 560 Countryside Drive, S.

City Troy State OH Zip Code 45373-4546

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 02 / 26 / 2009

Transaction ID: 90305.C19506

Amount of Each Receipt this Period 500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Robert M. Barry

Mailing Address 170 Glen Arbor Court

City Glen Ellyn State IL Zip Code 60137-3222

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

Name of Employer AT&T, Inc. Occupation Government Affairs Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 90402.C19924

Amount of Each Receipt this Period 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Bernard B. Bertsche

Mailing Address 41W872 White Oak Lane

City Saint Charles State IL Zip Code 60175-8349

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

Name of Employer Camcraft, Inc. Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 90402.C20055

Amount of Each Receipt this Period 2400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 97  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Richard J. Blossfield

Mailing Address 27W731 Garys Mill Road

City Winfield State IL Zip Code 60190-1555

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

Name of Employer Standard Out-of-Home Media Occupation Owner/ President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009  
Transaction ID: 90402.C19807  
Amount of Each Receipt this Period 250.00

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

**B.** Full Name (Last, First, Middle Initial)  
James E. Bramsen

Mailing Address 26 Ridge Road

City Barrington State IL Zip Code 60010-9656

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

Name of Employer Spraying Systems Co. Occupation c.e.o.

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1400.00

Date of Receipt 03 / 09 / 2009  
Transaction ID: 90402.C19545  
Amount of Each Receipt this Period 2400.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kenne P. Bristol

Mailing Address 157 S. Arlington Avenue

City Elmhurst State IL Zip Code 60126-3501

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt 03 / 09 / 2009  
Transaction ID: 90402.C19554  
Amount of Each Receipt this Period 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3150.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Craig S. Burkhardt  
Mailing Address 750 17th Street, N.W., #900  
City Washington State DC Zip Code 20006-4607  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Barnes and Thornburg Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 02 / 09 / 2009  
Transaction ID: 90305.C19426  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Miles P. Cahill  
Mailing Address 603 S. Hale Street  
City Wheaton State IL Zip Code 60187-5225  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Spiegle and Cahill, PC Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 03 / 19 / 2009  
Transaction ID: 90402.C19742  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Kirsten A. Chadwick  
Mailing Address P. O. Box 3126  
City Alexandria State VA Zip Code 22302  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fierce, Isakowitz & Blalock Occupation Partner  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90402.C19954  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Doris Christopher	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 323 Hillcrest Avenue	<b>Transaction ID:</b> 90402.C19639
	City State Zip Code Hinsdale IL 60521-4737	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation The Pampered Chef Chairman Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jay Christopher	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 323 Hillcrest Avenue	<b>Transaction ID:</b> 90402.C19634
	City State Zip Code Hinsdale IL 60521-4737	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Thatcher Corp. Chairman Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen B. Clark	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 9273 Lerwick Drive	<b>Transaction ID:</b> 90402.C19952
	City State Zip Code Dublin OH 43017	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Clark, Lytle & Geduldig Partner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 97

(check only one)

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

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)  
Roskam for Congress Committee

**A.**

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

Mailing Address 485 Chesterfield Lane

City State Zip Code  
North Aurora IL 60542-9108

FEC ID number of contributing federal political committee. C

Name of Employer  
Datawatch Corp.

Occupation  
Sales

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
03 / 13 / 2009

**Transaction ID:** 90402.C19603

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
H. Paul De Groot

Mailing Address 1S500 Fairview

City State Zip Code  
Lombard IL 60148

FEC ID number of contributing federal political committee. C

Name of Employer  
Landfill Operations, Inc.

Occupation  
landfiill operator

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
03 / 26 / 2009

**Transaction ID:** 90402.C19914

Amount of Each Receipt this Period  
250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Lawrence E. Doherty

Mailing Address 907 Whitegate Drive

City State Zip Code  
Mount Prospect IL 60056

FEC ID number of contributing federal political committee. C

Name of Employer  
n/a

Occupation  
Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt  
02 / 04 / 2009

**Transaction ID:** 90305.C19395

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 700.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Lawrence E. Doherty

Mailing Address 907 Whitegate Drive

City State Zip Code  
Mount Prospect IL 60056

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt MM / DD / YYYY  
03 / 24 / 2009

**Transaction ID:** 90402.C20048

Amount of Each Receipt this Period 200.00

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

**B.** Full Name (Last, First, Middle Initial)  
Deborah D. Fellowes

Mailing Address 343 E. Jefferson Avenue

City State Zip Code  
Wheaton IL 60187-4209

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt MM / DD / YYYY  
03 / 10 / 2009

**Transaction ID:** 90402.C19570

Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Bonnie J. Fuchs

Mailing Address 321 E. Forest Avenue

City State Zip Code  
Wheaton IL 60187-3832

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt MM / DD / YYYY  
02 / 09 / 2009

**Transaction ID:** 90305.C19420

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 950.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert J. Galgan, Jr.	Date of Receipt MM / DD / YYYY 01 / 27 / 2009
	Mailing Address 22 W. 673 Ahlstrand Drive	<b>Transaction ID:</b> 90305.C19205
	City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-Employed Occupation Attorney	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Karl M. Gallant	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 9506 Gauge Drive	<b>Transaction ID:</b> 90402.C19991
	City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Aduston Consulting Occupation Executive	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Sam Geduldig	Date of Receipt MM / DD / YYYY 02 / 09 / 2009
	Mailing Address 1519 Pathfinder Lane	<b>Transaction ID:</b> 90305.C19425
	City State Zip Code Mc Lean VA 22101	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Clark, Lytle & Geduldig Occupation Partner	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 97  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Versa M. Gollan

Mailing Address 5404 Benton Avenue

City Downers Grove State IL Zip Code 60515-5033

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 90402.C19910

Amount of Each Receipt this Period 500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Rhonda E. Graff

Mailing Address 1561 Camden Place

City Wheaton State IL Zip Code 60187-7452

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 28 / 2009

Transaction ID: 90408.C20156

Amount of Each Receipt this Period 2400.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Christine L. Hackett

Mailing Address 5135 Sherier Place, N.W.

City Washington State DC Zip Code 20016-3321

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

Name of Employer Gilbane Building Co. Occupation business development

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2009

Transaction ID: 90305.C19478

Amount of Each Receipt this Period 250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3150.00**

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

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

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

FOR LINE NUMBER: PAGE 36 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary Beth Harris

Mailing Address 10924 Beth Drive

City State Zip Code  
Orland Park IL 60467-9362

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

**Transaction ID:** 90402.C19518

Amount of Each Receipt this Period  
2400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Timothy J. Harris

Mailing Address 10924 Beth Drive

City State Zip Code  
Orland Park IL 60467

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

**Transaction ID:** 90402.C19517

Amount of Each Receipt this Period  
2400.00

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

**C.** Full Name (Last, First, Middle Initial)  
Kristen Hayler Hertel

Mailing Address 419 Sheridan Road

City State Zip Code  
Winnetka IL 60093-2626

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	9

**Transaction ID:** 90402.C19535

Amount of Each Receipt this Period  
2400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 97  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Bernadine T. Hines

Mailing Address 345 E. Hickory Street

City State Zip Code  
Hinsdale IL 60521-3824

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2009

Transaction ID: 90402.C19723

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Barbara A. Hudson

Mailing Address 8112 Woodcreek Court

City State Zip Code  
Downers Grove IL 60516-4536

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2009

Transaction ID: 90305.C19175

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Peter H. Huizenga

Mailing Address 44 Baybrook Lane

City State Zip Code  
Oak Brook IL 60523-1639

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

Name of Employer Huizenga Capital Management Occupation Chairman

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
03 / 05 / 2009

Transaction ID: 90402.C19532

Amount of Each Receipt this Period  
2400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Siham Ibrahim	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 875 E. 22nd Street, #402	<b>Transaction ID:</b> 90402.C20034
	City Lombard State IL Zip Code 60148-5026	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self-Employed Occupation Accountant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven E. Irizarry	Date of Receipt MM / DD / YYYY 03 / 25 / 2009
	Mailing Address 1600 N. Oak Street, #1431	<b>Transaction ID:</b> 90402.C19863
	City Arlington State VA Zip Code 22209	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Capitol Hill Consulting Group Occupation govt. relations Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard M. Jaffee	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 1418 N. Lake Shore Drive	<b>Transaction ID:</b> 90402.C19598
	City Chicago State IL Zip Code 60610-1631	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Oil-Dri Corp. of America Occupation Chairman Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 97  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Richard M. Jaffee

Mailing Address 1418 N. Lake Shore Drive

City State Zip Code  
Chicago IL 60610-1631

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

Name of Employer Occupation  
Oil-Dri Corp. of America Chairman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4800.00

Date of Receipt  
MM / DD / YYYY  
03 / 12 / 2009

Transaction ID: 90402.C19597

Amount of Each Receipt this Period  
2400.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Richard A. Jorgensen

Mailing Address 1028 Gary Court

City State Zip Code  
Wheaton IL 60187-4000

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

Name of Employer Occupation  
DuPage Surgical Consultants Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2009

Transaction ID: 90305.C19233

Amount of Each Receipt this Period  
250.00

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

**C.**

Full Name (Last, First, Middle Initial)  
James K. Kaiser

Mailing Address 1574 Wadsworth Road

City State Zip Code  
Wheaton IL 60187

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

Name of Employer Occupation  
RPM Direct Marketing Consultant

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2009

Transaction ID: 90408.C20160

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3150.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 97

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gary G. Kaplan</p> <p>Mailing Address 455 Dayton Avenue, #305</p> <p>City State Zip Code Saint Paul MN 55102-4557</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation US Bank Corp Investments mutual fund technician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">100.00</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 2 4 / 2 0 0 9</td> </tr> </table> </p> <p><b>Transaction ID:</b> 90129.C20899</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	0 1 / 2 4 / 2 0 0 9
M M / D D / Y Y Y Y			
0 1 / 2 4 / 2 0 0 9			

<p><b>B.</b> Full Name (Last, First, Middle Initial) Gary G. Kaplan</p> <p>Mailing Address 455 Dayton Avenue, #305</p> <p>City State Zip Code Saint Paul MN 55102-4557</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation US Bank Corp Investments mutual fund technician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">200.00</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 2 / 0 6 / 2 0 0 9</td> </tr> </table> </p> <p><b>Transaction ID:</b> 90305.C19362</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	0 2 / 0 6 / 2 0 0 9
M M / D D / Y Y Y Y			
0 2 / 0 6 / 2 0 0 9			

<p><b>C.</b> Full Name (Last, First, Middle Initial) Gary G. Kaplan</p> <p>Mailing Address 455 Dayton Avenue, #305</p> <p>City State Zip Code Saint Paul MN 55102-4557</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation US Bank Corp Investments mutual fund technician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 3 / 0 5 / 2 0 0 9</td> </tr> </table> </p> <p><b>Transaction ID:</b> 90402.C19536</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	0 3 / 0 5 / 2 0 0 9
M M / D D / Y Y Y Y			
0 3 / 0 5 / 2 0 0 9			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">300.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 97  
(check only one)

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

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)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert F. Keith

Mailing Address 788 Jeffrey Court

City State Zip Code  
Wheaton IL 60187-8175

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

Name of Employer Occupation  
Hibbs Enterprises Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: 90305.C19400

Amount of Each Receipt this Period  
500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Stephen M. Kelke

Mailing Address 1365 Jansen Court

City State Zip Code  
Wheaton IL 60187-1415

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

Name of Employer Occupation  
Inspired Exhibits, Inc. Sales

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2009

Transaction ID: 90402.C19593

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Kimball

Mailing Address 1333 H Street, N.W., #620-East

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
Jeffrey Kimbell & Associates c.e.o.

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2009

Transaction ID: 90402.C19861

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Carol S. Klobucher	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 1857 Kandahar Court	<b>Transaction ID:</b> 90402.C19578
	City State Zip Code Wheaton IL 60187-1414	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer n/a Occupation Homemaker Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David R. Knuepfer	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 765 N. Park Blvd.	<b>Transaction ID:</b> 90402.C19539
	City State Zip Code Glen Ellyn IL 60137-3967	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer DuPage Machine Products Occupation president/c.e.o. Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marcia A. Knuepfer	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 765 N. Park Blvd.	<b>Transaction ID:</b> 90402.C19540
	City State Zip Code Glen Ellyn IL 60137-3967	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer n/a Occupation Homemaker Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5050.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jennifer D. Kocan</p> <p>Mailing Address 25W178 39th Street</p> <p>City Naperville State IL Zip Code 60563-1433</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer n/a Occupation Homemaker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">150.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 0 2 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 90305.C19330</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Jennifer D. Kocan</p> <p>Mailing Address 25W178 39th Street</p> <p>City Naperville State IL Zip Code 60563-1433</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer n/a Occupation Homemaker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 1 3 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 90402.C19602</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Jerome Kolavo</p> <p>Mailing Address 27650 Ferry Road</p> <p>City Warrenville State IL Zip Code 60555-3844</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-Employed Occupation Physician</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 1 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> 90305.C19262</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 44 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Sheila L. Komarek

Mailing Address 1417 Spyglass Lane

City State Zip Code  
Itasca IL 60143

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

Name of Employer Occupation  
Alexian Brothers Medical nurse practitioner  
Ctr.

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 23 / 2009

**Transaction ID:** 90402.C20049

Amount of Each Receipt this Period  
250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Sheldon H. D. Lee

Mailing Address 130 Somerset Road

City State Zip Code  
Hinsdale IL 60521

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

Name of Employer Occupation  
Argonne National Laboratory chemical engineer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 03 / 2009

**Transaction ID:** 90305.C19352

Amount of Each Receipt this Period  
150.00

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

**C.** Full Name (Last, First, Middle Initial)  
Sheldon H. D. Lee

Mailing Address 130 Somerset Road

City State Zip Code  
Hinsdale IL 60521

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

Name of Employer Occupation  
Argonne National Laboratory chemical engineer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2009

**Transaction ID:** 90402.C19984

Amount of Each Receipt this Period  
150.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 97

(check only one)

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

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)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Bill Lowery

Mailing Address 812 E. Capitol Street, N.E.

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. C

Name of Employer U.S. Government Occupation congressman

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
03 / 02 / 2009

**Transaction ID:** 90402.C19516

Amount of Each Receipt this Period 500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Robert J. Marek

Mailing Address 32-51 44th Street

City Astoria State NY Zip Code 11103

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
01 / 29 / 2009

**Transaction ID:** 90305.C19264

Amount of Each Receipt this Period 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Daniel James Mattoon

Mailing Address 6344 Cavalier Corridor

City Falls Church State VA Zip Code 22044-1203

FEC ID number of contributing federal political committee. C

Name of Employer Mattoon & Associates Occupation President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
03 / 25 / 2009

**Transaction ID:** 90402.C19898

Amount of Each Receipt this Period 1000.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 97

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Scott A. McGovney

Mailing Address 25W163 Brandywine Court

City State Zip Code  
Naperville IL 60540-3532

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 9

Transaction ID: 90305.C19422

Amount of Each Receipt this Period

200.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)  
Scott A. McGovney

Mailing Address 25W163 Brandywine Court

City State Zip Code  
Naperville IL 60540-3532

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 9

Transaction ID: 90402.C19990

Amount of Each Receipt this Period

100.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)  
John McManus

Mailing Address 2082 Grace Manor Court

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
The McManus Group President

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 9

Transaction ID: 90402.C19956

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 97  
(check only one)

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

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)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Harold C. Merrill

Mailing Address 19 Muirfield Circle

City State Zip Code  
Wheaton IL 60187

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2009

Transaction ID: 90402.C19606

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Nancy J. Morey

Mailing Address 887 Crescent Blvd.

City State Zip Code  
Glen Ellyn IL 60137

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

Name of Employer NJM Enterprise Occupation Designer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
03 / 12 / 2009

Transaction ID: 90402.C19576

Amount of Each Receipt this Period  
2400.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Scott A. Morey

Mailing Address 887 Crescent Blvd.

City State Zip Code  
Glen Ellyn IL 60137-4274

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

Name of Employer Morey Corporation Occupation Engineer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
03 / 12 / 2009

Transaction ID: 90402.C19577

Amount of Each Receipt this Period  
2400.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5050.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Richard B. Murphy</p> <p>Mailing Address 6041 Woodmont Road</p> <p>City State Zip Code Alexandria VA 22307</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation R.B. Murphy &amp; Accoc. LLC Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 25 / 2009</span></p> <p><b>Transaction ID:</b> 90402.C19897</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Judy B. Nussbaum</p> <p>Mailing Address 337 E. Prairie Avenue</p> <p>City State Zip Code Wheaton IL 60187-3818</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation n/a Homemaker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">01 / 05 / 2009</span></p> <p><b>Transaction ID:</b> 90126.C20893</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Barbara J. Peterson</p> <p>Mailing Address 184 Dickinson Drive</p> <p>City State Zip Code Wheaton IL 60187-7417</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation n/a Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 16 / 2009</span></p> <p><b>Transaction ID:</b> 90402.C19717</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
James R. Prister  
Mailing Address 4120 Emporia Court  
City Naperville State IL Zip Code 60564  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RML Specialty Hospital Occupation Administration  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00  
Date of Receipt 02 / 03 / 2009  
Transaction ID: 90305.C19355  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bruce V. Rauner  
Mailing Address 720 Rosewood Avenue  
City Winnetka State IL Zip Code 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GTCR Golder Rauner Occupation Chairman  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2400.00  
Date of Receipt 03 / 18 / 2009  
Transaction ID: 90402.C19750  
Amount of Each Receipt this Period 2400.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bruce V. Rauner  
Mailing Address 720 Rosewood Avenue  
City Winnetka State IL Zip Code 60093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GTCR Golder Rauner Occupation Chairman  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
4800.00  
Date of Receipt 03 / 18 / 2009  
Transaction ID: 90402.C19749  
Amount of Each Receipt this Period 2400.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5050.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Diana M. Rauner		Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 720 Rosewood Avenue		Transaction ID: 90402.C19752
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
	Name of Employer Ounce of Prevention Fund	Occupation Executive Director	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00
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<b>B.</b>	Full Name (Last, First, Middle Initial) Diana M. Rauner		Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 720 Rosewood Avenue		Transaction ID: 90402.C19751
	City Winnetka	State IL	Zip Code 60093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
	Name of Employer Ounce of Prevention Fund	Occupation Executive Director	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00
---	-------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Christian M. Richter		Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1608 East Avenue		Transaction ID: 90408.C20095
	City Mc Lean	State VA	Zip Code 22101
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Navista	Occupation Consultant	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 97  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Benita Romano  
Mailing Address 644 Dalewood Lane  
City Hinsdale State IL Zip Code 60521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2300.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90402.C19926  
Amount of Each Receipt this Period 2300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michael J. Romano, III  
Mailing Address 644 Dalewood Lane  
City Hinsdale State IL Zip Code 60521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2300.00  
Date of Receipt 03 / 30 / 2009  
Transaction ID: 90402.C19925  
Amount of Each Receipt this Period 2300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Colin Roskey  
Mailing Address 444 8th Street, N.W., #914  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Alston & Bird, LLP Occupation Attorney  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 25 / 2009  
Transaction ID: 90402.C19894  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward B. Rust, Jr.  
Mailing Address 16 Downing Circle  
City Bloomington State IL Zip Code 61704-7619  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Insurance Occupation c.e.o./chairman  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 03 / 18 / 2009  
Transaction ID: 90402.C19772  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John K. Rutledge  
Mailing Address 1898 Cambridge Lane  
City Wheaton State IL Zip Code 60187-8406  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rutledge Company, LLC Occupation Real Estate Consultant  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 03 / 18 / 2009  
Transaction ID: 90402.C19756  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Loretta N. Sands  
Mailing Address 1150 Wheaton Oaks Drive  
City Wheaton State IL Zip Code 60187-1715  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 02 / 17 / 2009  
Transaction ID: 90305.C19465  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Muneer A. Satter</p> <p>Mailing Address 419 Sheridan Road</p> <p>City State Zip Code Winnetka IL 60093-2626</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Goldman Sachs Investment Banker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 05 / 2009</span></p> <p><b>Transaction ID:</b> 90402.C19534</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Frank Saverino</p> <p>Mailing Address 538 E. Randy Road</p> <p>City State Zip Code Carol Stream IL 60188-2122</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Saverino &amp; Associates Food Broker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">02 / 19 / 2009</span></p> <p><b>Transaction ID:</b> 90305.C19480</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) David R. Schlueter</p> <p>Mailing Address 21W237 Woodview Drive</p> <p>City State Zip Code Itasca IL 60143</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Gorn &amp; Schlueter, Ltd. Attorney</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">03 / 23 / 2009</span></p> <p><b>Transaction ID:</b> 90402.C19810</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3200.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Jerrold K. Senser

Mailing Address 55 S. Deere Park Drive

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Institutional Capital      Occupation Securities Analyst

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 10 / 2009

**Transaction ID:** 90402.C19568

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Martin J. Sikorski

Mailing Address 1912 E. York Lane

City State Zip Code  
Wheaton IL 60187-5816

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

Name of Employer Glen Ellyn Vision Center      Occupation Optometrist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2009

**Transaction ID:** 90408.C20167

Amount of Each Receipt this Period  
2400.00

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

**C.** Full Name (Last, First, Middle Initial)  
William D. Smithburg

Mailing Address 676 N. Michigan Avenue, #3860

City State Zip Code  
Chicago IL 60611-2837

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

Name of Employer n/a      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 19 / 2009

**Transaction ID:** 90402.C19783

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Brad Sommerfeld	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1414 E. Thomas Road	<b>Transaction ID:</b> 90402.C19829
	City State Zip Code Wheaton IL 60187	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation MKS, Inc. software architect	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Donald R. Stroben	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 792 Lynwood Drive	<b>Transaction ID:</b> 90305.C19318
	City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self-Employed Investor	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Donald R. Stroben	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 792 Lynwood Drive	<b>Transaction ID:</b> 90402.C19842
	City State Zip Code Encinitas CA 92024	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self-Employed Investor	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 56 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Donald E. Sveen  
 Mailing Address 25W461 Plamondon Road  
 City State Zip Code  
 Wheaton IL 60189  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation Retired  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2400.00  
 Date of Receipt 03 / 30 / 2009  
**Transaction ID:** 90402.C19979  
 Amount of Each Receipt this Period 2400.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Marjorie L. Sveen  
 Mailing Address 25W461 Plamondon Road  
 City State Zip Code  
 Wheaton IL 60189  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation Retired  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2400.00  
 Date of Receipt 03 / 30 / 2009  
**Transaction ID:** 90402.C19980  
 Amount of Each Receipt this Period 2400.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Linda E. Tarplin  
 Mailing Address 1212 New Yourk Avenue, N.W., #1050  
 City State Zip Code  
 Washington DC 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Tarplin, Downs, & Young, LLC Occupation Partner  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 500.00  
 Date of Receipt 03 / 09 / 2009  
**Transaction ID:** 90402.C19550  
 Amount of Each Receipt this Period 500.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5300.00  
**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mark D. Taylor</p> <p>Mailing Address 1605 E. Forest Avenue</p> <p>City State Zip Code Wheaton IL 60187-4476</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Tyndale House Publishers      Occupation c.e.o./publisher</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">-150.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 27 / 2009</span></p> <p><b>Transaction ID:</b> 90408.C20137</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Daniel C. Ustian</p> <p>Mailing Address 4201 Winfield Road</p> <p>City State Zip Code Warrenville IL 60555</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Navistar      Occupation c.e.o.</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 03 / 2009</span></p> <p><b>Transaction ID:</b> 90305.C19398</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Mary Warren</p> <p>Mailing Address 724 S. Garfield Avenue</p> <p>City State Zip Code Hinsdale IL 60521-4425</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer n/a      Occupation Homemaker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 05 / 2009</span></p> <p><b>Transaction ID:</b> 90402.C19530</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Victor G. Warren

Mailing Address 724 S. Garfield Avenue

City Hinsdale State IL Zip Code 60521-4425

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

Name of Employer Farrington Transportation Occupation transportation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 05 / 2009  
**Transaction ID:** 90402.C19529  
 Amount of Each Receipt this Period 2400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Eric Werner

Mailing Address 3804 Royal Fox Drive

City Saint Charles State IL Zip Code 60174

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

Name of Employer WCAG, Ltd. Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 01 / 08 / 2009  
**Transaction ID:** 90126.C20896  
 Amount of Each Receipt this Period 1250.00

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

**C.** Full Name (Last, First, Middle Initial)  
Joel C. White

Mailing Address 4644 24th Street, N.

City Arlington State VA Zip Code 22207

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

Name of Employer J. C. White Consulting Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009  
**Transaction ID:** 90402.C19968  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 97  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Richard C. White

Mailing Address 5035 Macomb Street, N.W.

City Washington State DC Zip Code 20016

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

Name of Employer Alpine Group Occupation Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2009  
**Transaction ID:** 90402.C19900  
 Amount of Each Receipt this Period 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Loretta M. Widiger

Mailing Address 3 Oak Brook Club Drive, #306

City Oak Brook State IL Zip Code 60523

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2009  
**Transaction ID:** 90402.C19533  
 Amount of Each Receipt this Period 500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Robert D. Wood

Mailing Address 813 Vicar Lane

City Alexandria State VA Zip Code 22302-3420

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

Name of Employer Barbour Griffith & Rogers Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009  
**Transaction ID:** 90402.C19951  
 Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 97  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Martin Ziegner

Mailing Address 22W370 2nd Street

City State Zip Code  
Glen Ellyn IL 60137

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

Name of Employer Self-Employed Occupation  
Dentist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2009

Transaction ID: 90408.C20175

Amount of Each Receipt this Period  
250.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	106400.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Patton Boggs, LLP	Transaction ID: 90402.E2451 Date of Disbursement 03 / 19 / 2009
	Mailing Address 2550 M Street, N.W.	Amount of Each Disbursement this Period 233.75
	City Washington State DC Zip Code 20037-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement legal 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) ▼
		LEGAL SERVICES

B.	Full Name (Last, First, Middle Initial) 211 E. Illinois, LLC	Transaction ID: 90126.E2621 Date of Disbursement 01 / 15 / 2009
	Mailing Address 2S266 Center Avenue	Amount of Each Disbursement this Period 1500.00
	City Wheaton State IL Zip Code 60187-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office rent 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) ▼
		OFFICE RENT

C.	Full Name (Last, First, Middle Initial) 211 E. Illinois, LLC	Transaction ID: 90305.E2386 Date of Disbursement 02 / 13 / 2009
	Mailing Address 2S266 Center Avenue	Amount of Each Disbursement this Period 1500.00
	City Wheaton State IL Zip Code 60187-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office rent 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) ▼
		OFFICE RENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3233.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) 211 E. Illinois, LLC</p> <p>Mailing Address 2S266 Center Avenue</p> <p>City Wheaton State IL Zip Code 60187-</p> <p>Purpose of Disbursement office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2444</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE RENT</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) All Star Printing of Wheaton, Inc.</p> <p>Mailing Address 635 S. Carlton Street</p> <p>City Wheaton State IL Zip Code 60187-4860</p> <p>Purpose of Disbursement printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90129.E2641</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="173.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PRINTING</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) All Star Printing of Wheaton, Inc.</p> <p>Mailing Address 635 S. Carlton Street</p> <p>City Wheaton State IL Zip Code 60187-4860</p> <p>Purpose of Disbursement printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2404</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="71.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PRINTING</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1744.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 63 / 97

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
American Council of Life Insurers PAC

Mailing Address 101 Constitution Ave., N.W., #700

City Washington State DC Zip Code 20001-

Purpose of Disbursement meeting expenses

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90305.C19458IK

Date of Disbursement

02 / 04 / 2009

Amount of Each Disbursement this Period

130.84

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

IN KIND: MEETING EXPENSES

B.

Full Name (Last, First, Middle Initial)  
Arena Communications

Mailing Address 1780 Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104-5102

Purpose of Disbursement direct mail services G08

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90402.E2448

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

24546.00

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

DIRECT MAIL SERVICES G08

C.

Full Name (Last, First, Middle Initial)  
Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave., S.E.

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement software

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90305.E2390

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

6900.00

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

SOFTWARE

SUBTOTAL of Disbursements This Page (optional) ▶

31576.84

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
AT&T Telecommunications

Transaction ID: 90126.E2630  
Date of Disbursement

Mailing Address P. O. Box 8100

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	0	9

City Aurora State IL Zip Code 60507-8100

Amount of Each Disbursement this Period

237.71
--------

Purpose of Disbursement  
telephone

Category/ Type
-------------------

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

TELEPHONE

State: District:

B.

Full Name (Last, First, Middle Initial)  
AT&T Telecommunications

Transaction ID: 90305.E2407  
Date of Disbursement

Mailing Address P. O. Box 8100

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	9

City Aurora State IL Zip Code 60507-8100

Amount of Each Disbursement this Period

228.24
--------

Purpose of Disbursement  
telephone

Category/ Type
-------------------

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

TELEPHONE

State: District:

C.

Full Name (Last, First, Middle Initial)  
Bank of Tampa

Transaction ID: 90126.E2615  
Date of Disbursement

Mailing Address P. O. Box 1

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	0	9

City Tampa State FL Zip Code 33601-

Amount of Each Disbursement this Period

878.88
--------

Purpose of Disbursement  
payroll taxes

Category/ Type
-------------------

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

PAYROLL TAXES

State: District:

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

1344.83
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**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bank of Tampa</p> <p>Mailing Address P. O. Box 1</p> <p>City Tampa State FL Zip Code 33601-</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90126.E2637</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 76.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of Tampa</p> <p>Mailing Address P. O. Box 1</p> <p>City Tampa State FL Zip Code 33601-</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90130.E2645</p> <p>Date of Disbursement 02 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 955.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of Tampa</p> <p>Mailing Address P. O. Box 1</p> <p>City Tampa State FL Zip Code 33601-</p> <p>Purpose of Disbursement income taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2400</p> <p>Date of Disbursement 02 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1797.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>INCOME TAXES</b></p>

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

**2828.88**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bank of Tampa</p> <p>Mailing Address P. O. Box 1</p> <p>City Tampa State FL Zip Code 33601-</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2412</p> <p>Date of Disbursement 03 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 955.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Eugene Batchelar</p> <p>Mailing Address 21 Hawkins Circle</p> <p>City Wheaton State IL Zip Code 60189-</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2389</p> <p>Date of Disbursement 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 148.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>OFFICE SUPPLIES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Eugene Batchelar</p> <p>Mailing Address 21 Hawkins Circle</p> <p>City Wheaton State IL Zip Code 60189-</p> <p>Purpose of Disbursement water</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2406</p> <p>Date of Disbursement 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 33.55</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>WATER</b></p>

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

1137.67

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Campaign Solutions</p> <p>Mailing Address 118 N. St. Asaph Street</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement blast emails</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90126.E2633 <b>Date of Disbursement</b> 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 44.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>BLAST EMAILS</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Campaign Solutions</p> <p>Mailing Address 118 N. St. Asaph Street</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement website maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2391 <b>Date of Disbursement</b> 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 375.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>WEBSITE MAINTENANCE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Campaign Solutions</p> <p>Mailing Address 118 N. St. Asaph Street</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement blast emails</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2388 <b>Date of Disbursement</b> 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 125.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>BLAST EMAILS</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>545.21</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Transaction ID: 90126.E2624  
Date of Disbursement

Mailing Address 300 1st Street, S.E.

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	9

City Washington State DC Zip Code 20003-1801

Amount of Each Disbursement this Period

1426.14
---------

Purpose of Disbursement  
food & beverage/dues

Category/ Type
-------------------

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

Candidate Name

FOOD & BEVERAGE/DUES

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Transaction ID: 90126.E2623  
Date of Disbursement

Mailing Address 300 1st Street, S.E.

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	9

City Washington State DC Zip Code 20003-1801

Amount of Each Disbursement this Period

656.03
--------

Purpose of Disbursement  
food & beverage/dues

Category/ Type
-------------------

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

Candidate Name

FOOD & BEVERAGE/DUES

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Transaction ID: 90305.E2398  
Date of Disbursement

Mailing Address 300 1st Street, S.E.

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	0	9

City Washington State DC Zip Code 20003-1801

Amount of Each Disbursement this Period

56.56
-------

Purpose of Disbursement  
food & beverage

Category/ Type
-------------------

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

Candidate Name

FOOD & BEVERAGE

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2138.73
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TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st Street, S.E.</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement food &amp; beverage/dues</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2418</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 782.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>FOOD &amp; BEVERAGE/DUES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cardmember Service</p> <p>Mailing Address P. O. Box 15153</p> <p>City Wilmington State DE Zip Code 19886-</p> <p>Purpose of Disbursement CREDIT CARD:SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2367</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2638.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CREDIT CARD:SEE BELOW</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Budget Conferencing</p> <p>Mailing Address 60 State Street, #700</p> <p>City Boston State MA Zip Code 02109-1894</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90305.E2379</p> <p>Date of Disbursement 01 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 23.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> <b>MEMO: TELEPHONE</b></p>

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

**3421.33**

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

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
FedEx

Mailing Address P. O. Box 94515

City State Zip Code  
Palatine IL 60094-

Purpose of Disbursement  
delivery

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90305.E2383

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

1085.60

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

[MEMO ITEM]

MEMO: DELIVERY

B.

Full Name (Last, First, Middle Initial)  
GoDaddy.com, Inc.

Mailing Address 14455 N. Hayden Road, #219

City State Zip Code  
Scottsdale AZ 85260-6947

Purpose of Disbursement  
domain registration

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90305.E2376

Date of Disbursement

12 / 21 / 2008

Amount of Each Disbursement this Period

7.28

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

[MEMO ITEM]

MEMO: DOMAIN REGISTRATION

C.

Full Name (Last, First, Middle Initial)  
Hilton Bloomingdale

Mailing Address 250 W. Schick Road

City State Zip Code  
Bloomingdale IL 60108-

Purpose of Disbursement  
food & beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90305.E2369

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

194.40

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

[MEMO ITEM]

MEMO: FOOD & BEVERAGE

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address P. O. Box 63321

City Cincinnati State OH Zip Code 45263-

Purpose of Disbursement  
office supplies

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90305.E2370  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	0	8

Amount of Each Disbursement this Period

34.43
-------

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

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 122 N. Wheaton Avenue

City Wheaton State IL Zip Code 60187-5139

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90305.E2375  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

42.00
-------

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

[MEMO ITEM]

MEMO: POSTAGE

C.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 122 N. Wheaton Avenue

City Wheaton State IL Zip Code 60187-5139

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90305.E2373  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	2	/	2	0	0	8

Amount of Each Disbursement this Period

8.00
------

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

[MEMO ITEM]

MEMO: POSTAGE

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90305.E2372 Date of Disbursement 12 / 17 / 2008
	Mailing Address P. O. Box 25505	Amount of Each Disbursement this Period 686.02
	City Lehigh Valley State PA Zip Code 18002-5505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone Candidate Name	<b>[MEMO ITEM]</b> MEMO: TELEPHONE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90305.E2380 Date of Disbursement 01 / 09 / 2009
	Mailing Address P. O. Box 25505	Amount of Each Disbursement this Period 73.50
	City Lehigh Valley State PA Zip Code 18002-5505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone Candidate Name	<b>[MEMO ITEM]</b> MEMO: TELEPHONE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Cardmember Service	Transaction ID: 90402.E2420 Date of Disbursement 03 / 10 / 2009
	Mailing Address P. O. Box 15153	Amount of Each Disbursement this Period 3220.38
	City Wilmington State DE Zip Code 19886-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD:SEE BELOW Candidate Name	CREDIT CARD:SEE BELOW
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3220.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Budget Conferencing</p> <p>Mailing Address 60 State Street, #700</p> <p>City Boston State MA Zip Code 02109-1894</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2440</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.77"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TELEPHONE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st Street, S.E.</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement food &amp; beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2445</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.34"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: FOOD &amp; BEVERAGE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cardmember Service</p> <p>Mailing Address P. O. Box 15153</p> <p>City Wilmington State DE Zip Code 19886-</p> <p>Purpose of Disbursement service charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2446</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="91.44"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: SERVICE CHARGE</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
The Congressional Institute

Mailing Address 401 Wythe Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
conference registration  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2433  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	0	9

Amount of Each Disbursement this Period

1063.00
---------

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

[MEMO ITEM]

MEMO: CONFERENCE REGISTRATION

B.

Full Name (Last, First, Middle Initial)  
Dominicks

Mailing Address 91 Danada Square, E.

City Wheaton State IL Zip Code 60187-8484

Purpose of Disbursement  
food & beverage  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2430  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	9

Amount of Each Disbursement this Period

24.17
-------

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

[MEMO ITEM]

MEMO: FOOD & BEVERAGE

C.

Full Name (Last, First, Middle Initial)  
Fogo De Chao

Mailing Address 1101 Pennsylvania Avenue

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
food & beverage  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2424  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	0	9

Amount of Each Disbursement this Period

266.45
--------

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

[MEMO ITEM]

MEMO: FOOD & BEVERAGE

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Fogo De Chao

Mailing Address 1101 Pennsylvania Avenue

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
food & beverage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2435  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	9	9

Amount of Each Disbursement this Period

47.27
-------

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

[MEMO ITEM]

MEMO: FOOD & BEVERAGE

B.

Full Name (Last, First, Middle Initial)  
GoDaddy.com, Inc.

Mailing Address 14455 N. Hayden Road, #219

City Scottsdale State AZ Zip Code 85260-6947

Purpose of Disbursement  
domain registration

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2436  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	9	9

Amount of Each Disbursement this Period

2.99
------

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

[MEMO ITEM]

MEMO: DOMAIN REGISTRATION

C.

Full Name (Last, First, Middle Initial)  
Tortilla Coast

Mailing Address 400 1st Street, S.E.

City Washington State DC Zip Code 20016-

Purpose of Disbursement  
food & beverage

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90402.E2441  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	9	9

Amount of Each Disbursement this Period

18.05
-------

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

[MEMO ITEM]

MEMO: FOOD & BEVERAGE

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
U.S. House of Representatives

Mailing Address B-217 Longworth Building

City Washington State DC Zip Code 20515-

Purpose of Disbursement gifts

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90402.E2423  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	9	

Amount of Each Disbursement this Period

52.78
-------

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

**[MEMO ITEM]**  
MEMO: GIFTS

B.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 122 N. Wheaton Avenue

City Wheaton State IL Zip Code 60187-5139

Purpose of Disbursement postage

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90402.E2431  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	9	

Amount of Each Disbursement this Period

355.00
--------

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

**[MEMO ITEM]**  
MEMO: POSTAGE

C.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 122 N. Wheaton Avenue

City Wheaton State IL Zip Code 60187-5139

Purpose of Disbursement postage

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 90402.E2427  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	9	

Amount of Each Disbursement this Period

69.85
-------

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

**[MEMO ITEM]**  
MEMO: POSTAGE

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

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P. O. Box 28870</p> <p>City Tucson State AZ Zip Code 85726-8870</p> <p>Purpose of Disbursement transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2429</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 201.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TRANSPORTATION</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P. O. Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002-5505</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90402.E2428</p> <p>Date of Disbursement 01 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 733.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: TELEPHONE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Comcast Communications</p> <p>Mailing Address P. O. Box 3001</p> <p>City Southeastern State PA Zip Code 19398-3001</p> <p>Purpose of Disbursement internet access/cable</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90126.E2635</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 207.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>INTERNET ACCESS/CABLE</p>

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

207.94

**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)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Comcast Communications

Mailing Address P. O. Box 3001

City Southeastern State PA Zip Code 19398-3001

Purpose of Disbursement internet access/cable

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90305.E2396  
Date of Disbursement

Amount of Each Disbursement this Period

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

INTERNET ACCESS/CABLE

**B.**

Full Name (Last, First, Middle Initial)  
Conservative Victory Fund

Mailing Address 1101 Pennsylvania Ave., S.E., #201

City Washington State DC Zip Code 20003-

Purpose of Disbursement faxing services

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90305.C19319IK  
Date of Disbursement

Amount of Each Disbursement this Period

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

IN KIND: FAXING SERVICES

**C.**

Full Name (Last, First, Middle Initial)  
Director of Employment Security

Mailing Address 33 S. State Street

City Chicago State IL Zip Code 60603-

Purpose of Disbursement payroll taxes

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90126.E2628  
Date of Disbursement

Amount of Each Disbursement this Period

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

PAYROLL TAXES

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) DuPage County Republican Party	Transaction ID: 90305.E2393 Date of Disbursement 02 / 13 / 2009
	Mailing Address 224 S. Washington Street	Amount of Each Disbursement this Period 300.00
	City Wheaton State IL Zip Code 60187-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement dinner tickets	Category/Type
	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) ▼
		DINNER TICKETS

B.	Full Name (Last, First, Middle Initial) DuPage Republican Central Committee	Transaction ID: 90126.E2634 Date of Disbursement 01 / 23 / 2009
	Mailing Address 224 S. Washington Street	Amount of Each Disbursement this Period 300.00
	City Wheaton State IL Zip Code 60187-5430	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement advertisement	Category/Type
	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) ▼
		ADVERTISEMENT

C.	Full Name (Last, First, Middle Initial) Edonations	Transaction ID: 90305.E2368 Date of Disbursement 02 / 05 / 2009
	Mailing Address 118 N. Saint Asaph Street	Amount of Each Disbursement this Period 133.00
	City Alexandria State VA Zip Code 22314-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement online fundraising	Category/Type
	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) ▼
		ONLINE FUNDRAISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>733.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Edonations  Mailing Address 118 N. Saint Asaph Street  City Alexandria State VA Zip Code 22314-  Purpose of Disbursement online 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) ▼	Transaction ID: 90402.E2419 Date of Disbursement 03 / 06 / 2009  Amount of Each Disbursement this Period 218.40  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  ONLINE FUNDRAISING
B.	Full Name (Last, First, Middle Initial) Florida Department of Revenue  Mailing Address 5050 W. Tennessee Street  City Tallahassee State FL Zip Code 32399-  Purpose of Disbursement income 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) ▼	Transaction ID: 90305.E2402 Date of Disbursement 02 / 23 / 2009  Amount of Each Disbursement this Period 391.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  INCOME TAXES
C.	Full Name (Last, First, Middle Initial) Amy Grant  Mailing Address 1023 Wheaton Place  City Wheaton State IL Zip Code 60187-3569  Purpose of Disbursement salary 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: 90126.E2584 Date of Disbursement 01 / 02 / 2009  Amount of Each Disbursement this Period 451.75  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1061.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Amy Grant <hr/> Mailing Address 1023 Wheaton Place <hr/> City Wheaton State IL Zip Code 60187-3569 <hr/> Purpose of Disbursement salary 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: 90130.E2647 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 451.75 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY
<b>B.</b>	Full Name (Last, First, Middle Initial) Amy Grant <hr/> Mailing Address 1023 Wheaton Place <hr/> City Wheaton State IL Zip Code 60187-3569 <hr/> Purpose of Disbursement salary 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: 90305.E2408 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 451.75 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY
<b>C.</b>	Full Name (Last, First, Middle Initial) Graphix Products <hr/> Mailing Address 36428 Treasury Center <hr/> City Chicago State IL Zip Code 60694-6400 <hr/> Purpose of Disbursement mailing 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: 90305.E2365 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 4685.06 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MAILING SERVICES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5588.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Illinois Department of Revenue	Transaction ID: 90126.E2614
	Mailing Address 100 W. Randolph Street	Date of Disbursement MM / DD / YYYY 01 / 05 / 2009
	City Chicago State IL Zip Code 60601-	Amount of Each Disbursement this Period 105.00
	Purpose of Disbursement payroll taxes	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Illinois Department of Revenue	Transaction ID: 90126.E2638
	Mailing Address 100 W. Randolph Street	Date of Disbursement MM / DD / YYYY 01 / 26 / 2009
	City Chicago State IL Zip Code 60601-	Amount of Each Disbursement this Period 5.00
	Purpose of Disbursement payroll taxes	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Illinois Department of Revenue	Transaction ID: 90130.E2646
	Mailing Address 100 W. Randolph Street	Date of Disbursement MM / DD / YYYY 02 / 02 / 2009
	City Chicago State IL Zip Code 60601-	Amount of Each Disbursement this Period 110.00
	Purpose of Disbursement payroll taxes	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	220.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Illinois Department of Revenue <hr/> Mailing Address 100 W. Randolph Street <hr/> City Chicago State IL Zip Code 60601- <hr/> Purpose of Disbursement income taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90305.E2401 Date of Disbursement 02 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 29.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>INCOME TAXES</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Illinois Department of Revenue <hr/> Mailing Address 100 W. Randolph Street <hr/> City Chicago State IL Zip Code 60601- <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90305.E2413 Date of Disbursement 03 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 110.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PAYROLL TAXES</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Richard M. Jaffee <hr/> Mailing Address 1418 N. Lake Shore Drive <hr/> City Chicago State IL Zip Code 60610-1631 <hr/> Purpose of Disbursement REIMBURSEMENT:SEE BELOW Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90126.E2620 Date of Disbursement 01 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 579.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>REIMBURSEMENT:SEE BELOW</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>718.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) The Standard Club Mailing Address 320 S. Plymouth Court City Chicago State IL Zip Code 60604-3802 Purpose of Disbursement catering 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: 90126.E2618 Date of Disbursement 10 / 23 / 2008
	Amount of Each Disbursement this Period 579.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: CATERING

<b>B.</b> Full Name (Last, First, Middle Initial) Brian McCarthy Mailing Address 754 Fox Run Drive City Geneva State IL Zip Code 60134-2866 Purpose of Disbursement salary 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: 90126.E2636 Date of Disbursement 01 / 23 / 2009
	Amount of Each Disbursement this Period 456.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

<b>C.</b> Full Name (Last, First, Middle Initial) Brian McCarthy Mailing Address 754 Fox Run Drive City Geneva State IL Zip Code 60134-2866 Purpose of Disbursement salary 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: 90130.E2650 Date of Disbursement 02 / 02 / 2009
	Amount of Each Disbursement this Period 456.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	913.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Brian McCarthy	Transaction ID: 90305.E2411 Date of Disbursement 03 / 02 / 2009
	Mailing Address 754 Fox Run Drive	Amount of Each Disbursement this Period 456.75
	City Geneva State IL Zip Code 60134-2866	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SALARY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Diane McElhenny	Transaction ID: 90126.E2586 Date of Disbursement 01 / 01 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 895.58
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SALARY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Diane McElhenny	Transaction ID: 90130.E2649 Date of Disbursement 02 / 02 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 895.58
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	SALARY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2247.91</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Diane McElhenny	Transaction ID: 90305.E2366 Date of Disbursement 02 / 05 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 134.34
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies/postage 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) ▼
		OFFICE SUPPLIES/POSTAGE

B.	Full Name (Last, First, Middle Initial) Diane McElhenny	Transaction ID: 90305.E2395 Date of Disbursement 02 / 13 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 77.87
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies/postage 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) ▼
		OFFICE SUPPLIES/POSTAGE

C.	Full Name (Last, First, Middle Initial) Diane McElhenny	Transaction ID: 90305.E2405 Date of Disbursement 02 / 25 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 126.00
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage 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) ▼
		POSTAGE

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

338.21

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)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Diane McElheney	Transaction ID: 90305.E2410 Date of Disbursement 03 / 02 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 895.58
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

B.	Full Name (Last, First, Middle Initial) Diane McElheney	Transaction ID: 90305.E2415 Date of Disbursement 03 / 05 / 2009
	Mailing Address 314 E. Harrison Avenue	Amount of Each Disbursement this Period 206.85
	City Wheaton State IL Zip Code 60187-4204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage 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) ▼
		POSTAGE

C.	Full Name (Last, First, Middle Initial) Connor McGee	Transaction ID: 90126.E2585 Date of Disbursement 01 / 02 / 2009
	Mailing Address 10 Muirwood Drive	Amount of Each Disbursement this Period 1974.79
	City Glen Ellyn State IL Zip Code 60137-3911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3077.22
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) Connor McGee	Transaction ID: 90130.E2648 Date of Disbursement 02 / 02 / 2009
	Mailing Address 10 Muirwood Drive	Amount of Each Disbursement this Period 1974.79
	City Glen Ellyn State IL Zip Code 60137-3911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SALARY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Connor McGee	Transaction ID: 90305.E2409 Date of Disbursement 03 / 02 / 2009
	Mailing Address 10 Muirwood Drive	Amount of Each Disbursement this Period 1974.79
	City Glen Ellyn State IL Zip Code 60137-3911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type SALARY
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Northwest Suburban Rep. Lincoln Day	Transaction ID: 90305.E2387 Date of Disbursement 02 / 12 / 2009
	Mailing Address P. O. Box 59207	Amount of Each Disbursement this Period 125.00
	City Schaumburg State IL Zip Code 60159-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement advertisement Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type ADVERTISEMENT
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4074.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Northwest Suburban Rep. Lincoln Day  Mailing Address P. O. Box 59207  City Schaumburg State IL Zip Code 60159-  Purpose of Disbursement dinner tickets 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: 90305.E2394 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 9  Amount of Each Disbursement this Period 200.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  DINNER TICKETS
<b>B.</b>	Full Name (Last, First, Middle Initial) PJs Camera  Mailing Address 662 Roosevelt Road  City Glen Ellyn State IL Zip Code 60137-5819  Purpose of Disbursement photos 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: 90126.E2631 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9  Amount of Each Disbursement this Period 364.65  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PHOTOS
<b>C.</b>	Full Name (Last, First, Middle Initial) PJs Camera  Mailing Address 662 Roosevelt Road  City Glen Ellyn State IL Zip Code 60137-5819  Purpose of Disbursement photos 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: 90305.E2417 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 9  Amount of Each Disbursement this Period 26.81  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PHOTOS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	591.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) PKL Consulting, Inc.	Transaction ID: 90305.E2385
	Mailing Address 621 Thornwood Lane	Date of Disbursement MM / DD / YYYY 02 / 06 / 2009
	City Winnetka State IL Zip Code 60093-	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement fundraising consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type FUNDRAISING CONSULTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PKL Consulting, Inc.	Transaction ID: 90305.E2414
	Mailing Address 621 Thornwood Lane	Date of Disbursement MM / DD / YYYY 03 / 02 / 2009
	City Winnetka State IL Zip Code 60093-	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement fundraising consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type FUNDRAISING CONSULTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) SCM Associates, Inc.	Transaction ID: 90305.E2399
	Mailing Address P. O. Box 254	Date of Disbursement MM / DD / YYYY 02 / 19 / 2009
	City Dublin State NH Zip Code 03444-	Amount of Each Disbursement this Period 4685.97
	Purpose of Disbursement direct mail services Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type DIRECT MAIL SERVICES
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>19685.97</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.	Full Name (Last, First, Middle Initial) SCM Associates, Inc.	Transaction ID: 90402.E2450 Date of Disbursement 03 / 19 / 2009
	Mailing Address P. O. Box 254	Amount of Each Disbursement this Period 1268.59
	City Dublin State NH Zip Code 03444-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telemarketing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TELEMARKETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SCM Associates, Inc.	Transaction ID: 90402.E2449 Date of Disbursement 03 / 19 / 2009
	Mailing Address P. O. Box 254	Amount of Each Disbursement this Period 1642.47
	City Dublin State NH Zip Code 03444-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telemarketing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TELEMARKETING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Seppala and Associates	Transaction ID: 90126.E2625 Date of Disbursement 01 / 15 / 2009
	Mailing Address 1161 Wayzata Blvd., E., #210	Amount of Each Disbursement this Period 354.00
	City Wayzata State MN Zip Code 55391-1935	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TRAVEL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3265.06</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) United Parcel Service, Inc. PAC  Mailing Address 55 Glenlake Parkway, N.E.  City Atlanta State GA Zip Code 30328-3474 Purpose of Disbursement facility rental 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: 90408.C20089IK Date of Disbursement 02 / 25 / 2009  Amount of Each Disbursement this Period 200.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  IN KIND: FACILITY RENTAL
<b>B.</b>	Full Name (Last, First, Middle Initial) United Parcel Service, Inc. PAC  Mailing Address 55 Glenlake Parkway, N.E.  City Atlanta State GA Zip Code 30328-3474 Purpose of Disbursement catering 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: 90408.C20090IK Date of Disbursement 02 / 25 / 2009  Amount of Each Disbursement this Period 75.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  IN KIND: CATERING
<b>C.</b>	Full Name (Last, First, Middle Initial) United Parcel Service, Inc. PAC  Mailing Address 55 Glenlake Parkway, N.E.  City Atlanta State GA Zip Code 30328-3474 Purpose of Disbursement catering 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: 90408.C20091IK Date of Disbursement 03 / 06 / 2009  Amount of Each Disbursement this Period 440.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  IN KIND: CATERING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	715.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
United Parcel Service, Inc. PAC

Transaction ID: 90408.C20092IK  
Date of Disbursement

Mailing Address 55 Glenlake Parkway, N.E.

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City Atlanta State GA Zip Code 30328-3474

Amount of Each Disbursement this Period

167.20
--------

Purpose of Disbursement  
catering

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

IN KIND: CATERING

State: District:

B.

Full Name (Last, First, Middle Initial)  
United States Treasury

Transaction ID: 90126.E2629  
Date of Disbursement

Mailing Address P. O. Box 30348

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	0	9

City Atlanta State GA Zip Code 30348-

Amount of Each Disbursement this Period

382.43
--------

Purpose of Disbursement  
payroll taxes

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

PAYROLL TAXES

State: District:

C.

Full Name (Last, First, Middle Initial)  
Robert Watkins & Company

Transaction ID: 90305.E2392  
Date of Disbursement

Mailing Address 610 South Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	9

City Tampa State FL Zip Code 33606-

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
accounting services

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

ACCOUNTING SERVICES

State: District:

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

3549.63
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TOTAL This Period (last page this line number only) .....

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**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 94 / 97

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Robert Watkins & Company

Transaction ID: 90402.E2421  
Date of Disbursement

Mailing Address 610 South Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	9

City Tampa State FL Zip Code 33606-

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
accounting services

--

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

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

ACCOUNTING SERVICES

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

3000.00
---------

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

102020.21
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Johnson for Mayor

**Transaction ID:** 90126.E2626  
Date of Disbursement

Mailing Address 615 Meadow Court

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	9

City Elk Grove Village State IL Zip Code 60007-

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
NON-FEDERAL CONTRIBUTION

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Tedisco for Congress, Inc.

**Transaction ID:** 90402.E2447  
Date of Disbursement

Mailing Address 1707 Route 9

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

City Clifton Park State NY Zip Code 12065-

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION-NY20

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District: Special

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

1250.00
---------

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

1250.00
---------

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Roskam for Congress Committee

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Capitol Hill Club			Nature of Debt (Purpose): food & beverage/dues
Mailing Address 300 1st Street, S.E.			
City Washington	State DC	ZIP Code 20003-1801	

Outstanding Balance Beginning This Period 2082.17		<b>Transaction ID: LS90126.E2623</b>	
Amount Incurred This Period 0.00	Payment This Period 2082.17	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Seppala and Associates			Nature of Debt (Purpose): travel
Mailing Address 1161 Wayzata Blvd., E., #210			
City Wayzata	State MN	ZIP Code 55391-1935	

Outstanding Balance Beginning This Period 354.00		<b>Transaction ID: LS90126.E2625</b>	
Amount Incurred This Period 0.00	Payment This Period 354.00	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Richard M. Jaffee			Nature of Debt (Purpose): REIMBURSEMENT:SEE BELOW
Mailing Address 1418 N. Lake Shore Drive			
City Chicago	State IL	ZIP Code 60610-1631	

Outstanding Balance Beginning This Period 579.32		<b>Transaction ID: LS90126.E2620</b>	
Amount Incurred This Period 0.00	Payment This Period 579.32	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> 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)  
Roskam for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Arena Communications	Nature of Debt (Purpose): direct mail services G08
Mailing Address 1780 Sequoia Vista Circle	
City State ZIP Code Salt Lake City UT 84104-5102	

Outstanding Balance Beginning This Period 73638.00	<b>Transaction ID: LS90402.E2448</b>	
Amount Incurred This Period 0.00	Payment This Period 24546.00	Outstanding Balance at Close of This Period 49092.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates, Inc.	Nature of Debt (Purpose): telemarketing
Mailing Address P. O. Box 254	
City State ZIP Code Dublin NH 03444-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: LS90408.E2471</b>	
Amount Incurred This Period 3297.84	Payment This Period 0.00	Outstanding Balance at Close of This Period 3297.84

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>52389.84</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	<b>52389.84</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>52389.84</b>