

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

COULSON FOR CONGRESS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

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)).....	128078.00	128078.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	128078.00	128078.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	37803.28	37803.28
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	37803.28	37803.28
8. Cash on Hand at Close of Reporting Period (from Line 27).....	140079.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	50682.40	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
COULSON FOR CONGRESS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

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	97000.00	97000.00
(i) Itemized (use Schedule A).....	12830.00	12830.00
(ii) Unitemized.....	109830.00	109830.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	18248.00	18248.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	128078.00	128078.00
(e) TOTAL CONTRIBUTIONS (other than loans) (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.....	50000.00	50000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	50000.00	50000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	178078.00	178078.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	37803.28	37803.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	195.00	195.00
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	37998.28	37998.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	178078.00
25. SUBTOTAL (add Line 23 and Line 24).....	178078.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37998.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	140079.72

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 65
(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)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARY J ABROE

Mailing Address 212 WOODBINE AVE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
College of Lake County Teacher

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4351

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JAY ALEXANDER

Mailing Address 2256 CARLYLE CT

City State Zip Code
BUFFALO GROVE IL 60089

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

Name of Employer Occupation
NORTH SHORE CARDIOLOGISTS PHYSICIAN

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4643

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
PATRICIA ANDERLUH

Mailing Address 1507 SEQUOIA TRAIL

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: SA11AI.4255

Amount of Each Receipt this Period
500.00

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 6 / 65
	(check only one)	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) LEWIS ARLT	Date of Receipt M M / D D / Y Y Y Y Y 09 / 23 / 2009
	Mailing Address 50 RIVERSIDE DR	Transaction ID: SA11AI.4407
	City NEW YORK State NY Zip Code 10024	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer HOULIHAN LAWRENCE REALTORS Occupation BRANCH MANAGER	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) PETER V BAUGHER	Date of Receipt M M / D D / Y Y Y Y Y 09 / 09 / 2009
	Mailing Address 1310 SHERIDAN RD	Transaction ID: SA11AI.4248
	City WILMETTE State IL Zip Code 60091	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SCHOPF & WEISS LLP Occupation ATTORNEY	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) MARK BEAUBIEN	Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2009
	Mailing Address 4 ACORN LN	Transaction ID: SA11AI.4470
	City BARRINGTON HILLS State IL Zip Code 60010	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer STATE OF ILLINOIS Occupation STATE REPRESENTATIVE	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3900.00
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 7 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MARY BEAUBIEN		Date of Receipt
	Mailing Address 4 ACORN LN		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 29 / 2009
	City	State	Zip Code
	BARRINGTON HILLS	IL	60010
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4494
Name of Employer NA		Occupation HOMEMAKER	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) PETER B BENSINGER		Date of Receipt
	Mailing Address 500 MAYFLOWER		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4425
Name of Employer BENSINGER DUPONT & ASSOCIATES		Occupation PRESIDENT EAP PROGRAMS	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) RONALD L BOORSTEIN		Date of Receipt
	Mailing Address 150 S WACKER DR STE 450		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 21 / 2009
	City	State	Zip Code
	CHICAGO	IL	60606
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4349
Name of Employer Self		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT H BRADNER

Mailing Address **207 AUDREYS CT SE**

City **VIENNA** State **VA** Zip Code **22180**

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

Name of Employer **HOLLAND & KNIGHT LLP** Occupation **ATTORNEY**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **750.00**

Date of Receipt **09 / 25 / 2009**
Transaction ID: SA11AI.4437
 Amount of Each Receipt this Period **750.00**

B. Full Name (Last, First, Middle Initial)
CRAIG S BURKHARDT

Mailing Address **4000 CATHEDRAL AVE NW STE 217B**

City **WASHINGTON** State **DC** Zip Code **20016**

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

Name of Employer **BARNES & THORNBURG LLP** Occupation **ATTORNEY**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **09 / 25 / 2009**
Transaction ID: SA11AI.4432
 Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
BARBARA CARR

Mailing Address **1024 N WESTERN AVE**

City **LAKE FOREST** State **IL** Zip Code **60045**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **09 / 30 / 2009**
Transaction ID: SA11AI.4575
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KIRSTEN CHADWICK

Mailing Address **601 PRESIDENT FORD LN**

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
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **09 / 29 / 2009**
Transaction ID: SA11AI.4466
 Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
MICHAEL CHAPPELL

Mailing Address **5400 MACOMB ST NW**

City **WASHINGTON** State **DC** Zip Code **20016**

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

Name of Employer **FIERCE ISAKOWITZ & BLALOCK** Occupation **PARTNER**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **09 / 29 / 2009**
Transaction ID: SA11AI.4476
 Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial)
MYRON CHERRY

Mailing Address **30 N LASALLE STE 2300**

City **CHICAGO** State **IL** Zip Code **60602**

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

Name of Employer **MMC & ASSOCIATES LLC** Occupation **ATTORNEY**

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **09 / 30 / 2009**
Transaction ID: SA11AI.4896
 Amount of Each Receipt this Period **1000.00**

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRANK CONSIDINE

Mailing Address 140 THORNTREE LN

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2009

Transaction ID: SA11AI.4478

Amount of Each Receipt this Period
2400.00

2400.00

B. Full Name (Last, First, Middle Initial)
ROSE COULSON

Mailing Address 1031 PACIFIC AVE

City State Zip Code
WAUKEGAN IL 60085

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

Name of Employer Occupation
RETIRED RETIRED

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

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

Transaction ID: SA11AI.4251

Amount of Each Receipt this Period
1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
WILLIAM R COULSON

Mailing Address 1701 SEQUOIA TRAIL

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
WILLIAM R COULSON LLC ATTORNEY

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: SA11AI.4304

Amount of Each Receipt this Period
2400.00

2400.00

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM R COULSON

Mailing Address 1701 SEQUOIA TRAIL

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
WILLIAM R COULSON LLC ATTORNEY

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: SA11AI.4382

Amount of Each Receipt this Period
1600.00

Election Cycle-to-Date 4000.00

B. Full Name (Last, First, Middle Initial)
DEREK CRAWFORD

Mailing Address 2315 CHESTNUT AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
KRAFT DISTRICT DIRECTOR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4618

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date 500.00

C. Full Name (Last, First, Middle Initial)
JULIA CURRY

Mailing Address 1 GALE AVE

City State Zip Code
RIVER FOREST IL 60305

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

Name of Employer Occupation
UNIVERSITY OF ILLINOIS ADMINISTRATOR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4600

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date 500.00

SUBTOTAL of Receipts This Page (optional) ► **2600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 12 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAUL DETLEFS

Mailing Address 2688 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
THE PRESTWICK GROUP LTD PRESIDENT

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4374

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BECKY DIBLASI

Mailing Address 130 DEARBORN AVE

City State Zip Code
RYE NY 10880

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

Name of Employer Occupation
NA STUDENT

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.4428

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ELIZABETH DIBLASI

Mailing Address 121 E 89TH ST APT 4

City State Zip Code
NEW YORK NY 10128

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

Name of Employer Occupation
ST JOSEPH SCHOOL TEACHER

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 23 / 2009

Transaction ID: SA11AI.4399

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JULIANNE M DIBLASI

Mailing Address 50 RIVERSIDE DR

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Occupation
ELIZA CORWIN FROST CHILD DIRECTOR
CNTR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4347

Amount of Each Receipt this Period
2400.00

2400.00

B. Full Name (Last, First, Middle Initial)
JULIANNE M DIBLASI

Mailing Address 50 RIVERSIDE DR

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Occupation
ELIZA CORWIN FROST CHILD DIRECTOR
CNTR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4388

Amount of Each Receipt this Period
2400.00

4800.00

C. Full Name (Last, First, Middle Initial)
THOMAS A DONAHOE

Mailing Address 560 GREEN BAY RD STE 300

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Occupation
RETIRED RETIRED

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.4426

Amount of Each Receipt this Period
500.00

500.00

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: (check only one)	PAGE 14 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Dr. DAVID DOOLEY		Date of Receipt
	Mailing Address 1446 MONTEREY DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2009
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4658
Name of Employer COLONIAL DENTAL GROUP		Occupation DENTIST	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) GREGORY J EATON		Date of Receipt
	Mailing Address 821 ARBOR LN		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 10 / 2009
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4278
Name of Employer SELF		Occupation BUSINESS OWNER	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) DONALD L FIERCE		Date of Receipt
	Mailing Address 600 NEW HAMPSHIRE AVE STE 1000 NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 29 / 2009
	City	State	Zip Code
	WASHINGTON	DC	20037
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4468
Name of Employer FIERCE ISAKOWITZ & BLALOCK		Occupation PARTNER	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL C FLAGG

Mailing Address 821 ARBOR LANE

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
THE MEETING GROUP CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2009

Transaction ID: SA11AI.4277

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES FLETCHER

Mailing Address 496 W ANDREW RD

City State Zip Code
SPRINGFIELD IL 62707

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

Name of Employer Occupation
FLETCHER TOPOL OBRIEN & KASPAR ATTORNEY

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4527

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LINDA FORMAN

Mailing Address 500 DAVIS ST

City State Zip Code
EVANSTON IL 60201

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

Name of Employer Occupation
SELF CPA

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4629

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES S GINSBURG

Mailing Address 885 BLUFF ST

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Occupation
VERNON PARK PARTNERS FINANCE

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4356

Amount of Each Receipt this Period
300.00

Election Cycle-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
ARTHUR S GOLD

Mailing Address 1200 N SHERIDAN RD

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation
ARTHUR S GOLD LLC ATTORNEY

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2009

Transaction ID: SA11AI.4449

Amount of Each Receipt this Period
2400.00

Election Cycle-to-Date 2400.00

C. Full Name (Last, First, Middle Initial)
Dr. CAROL M GORDON

Mailing Address 2336 N COMMONWEALTH NO 201

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Occupation
ELMHURST REHABILITATION PHYSICAL THERAPIST

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4628

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date 700.00

SUBTOTAL of Receipts This Page (optional) ► **3200.00**

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 17 / 65

(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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
ROBERTA GOSS

Mailing Address 620 ORCHARD LN

City State Zip Code
GLENCOE IL 60022

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOWARD & ROBERTA GOSS FOU-NDATI PHILANTHROPIST

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4354

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
FRED GOUGLER

Mailing Address 1945 BOSWORTH LANE

City State Zip Code
NORTHFIELD IL 60093

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF INVESTMENT ADVISOR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4645

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
DAVID GRAINGER

Mailing Address 100 GRAINGER PKWY

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
WW GRAINGER INC SENIOR CHAIRMAN

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4504

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) 2250.00

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 18 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) WILLIAM J HAGENAH	Date of Receipt MM / DD / YYYY 09 / 14 / 2009
	Mailing Address 315 WARWICK RD	Transaction ID: SA11AI.4284
	City KENILWORTH State IL Zip Code 60043	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer RETIRED Occupation RETIRED	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) JEFFREY C HAMMES	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 725 REDWOOD LN	Transaction ID: SA11AI.4375
	City GLENCOE State IL Zip Code 60025	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer KIRKLAND & ELLIS LLP Occupation Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) SHAN HANIGAN	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address 130 DEARBORN AVE	Transaction ID: SA11AI.4429
	City RYE State NY Zip Code 10580	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF Occupation CONSTRUCTION	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 19 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAIG HART

Mailing Address 18305 KICKAPOO LN

City HUDSON State IL Zip Code 61748

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4660

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ANDREW HOCHBERG

Mailing Address 77 S DEERE PARK

City HIGHLAND PARK State IL Zip Code 60035

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

Name of Employer NEXT REALTY LLC Occupation MANAGING PRINCIPAL

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
09 / 29 / 2009

Transaction ID: SA11AI.4486

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
L J HOCHBERG

Mailing Address 275 N DEERE PARK E

City HIGHLAND PARK State IL Zip Code 60035

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

Name of Employer RETIRED 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
09 / 29 / 2009

Transaction ID: SA11AI.4484

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACK HOTALING
Mailing Address 4515 N SEMINOLE DR
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer RIDGEBROOK TRAVEL Occupation TRAVEL AGENT
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt: 09 / 24 / 2009
Transaction ID: SA11AI.4408
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
VIRGINIA A HOTALING
Mailing Address 4515 SEMINOLE DR
City GLENVIEW State IL Zip Code 60025
FEC ID number of contributing federal political committee. **C**
Name of Employer CHICAGO BOTANIC GARDENS Occupation DIRECTOR GOVT AFFAIRS
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 550.00
Date of Receipt: 09 / 24 / 2009
Transaction ID: SA11AI.4410
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
RICHARD T HOUGH
Mailing Address 913 BARCLAY CIRCLE
City LAKE FOREST State IL Zip Code 60045
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 300.00
Date of Receipt: 09 / 21 / 2009
Transaction ID: SA11AI.4367
Amount of Each Receipt this Period: 300.00

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: (check only one)	PAGE 21 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MARK ISAKOWITZ		Date of Receipt
	Mailing Address 3198 POND MIST WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 29 / 2009
	City	State	Zip Code
	OAK HILL	VA	20171
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4441
Name of Employer FIERCE ISAKOWITZ & BLALOCK		Occupation POLITICAL CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) KAREN JACOBSEN		Date of Receipt
	Mailing Address 1764 CANTERBURY TRAIL		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2009
	City	State	Zip Code
	PALATINE	IL	60074
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4890
Name of Employer KEITH PARKER & ASSOCIATES, INC		Occupation ACCOUNTANT	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			In-kind - Fair Mkt Value of Computer Equipment

C.	Full Name (Last, First, Middle Initial) ROBERT D JAFFEE		Date of Receipt
	Mailing Address 650 DUNDEE RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 09 / 2009
	City	State	Zip Code
	NORTHBROOK	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4245
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN H JEFFERSON

Mailing Address 8 NORTHCREST CT

City State Zip Code
BLOOMINGTON IL 61701

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

Name of Employer Occupation
HERITAGE ENTERPRISES INC OWNER

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4671

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES R JENNINGS

Mailing Address 1220 OAKWOOD LN

City State Zip Code
GLENVIEW IL 50025

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

Name of Employer Occupation
JENNINGS CHEVROLET PRESIDENT

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2009

Transaction ID: SA11AI.4397

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NANCY JOHNSON

Mailing Address 141 S MOUNTAIN DR

City State Zip Code
NEW BRITAIN CT 06052

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

Name of Employer Occupation
BAKER DONELSON ADVISOR - LOBBYIST

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4783

Amount of Each Receipt this Period
250.00

EARMARKED - WISH LIST THE

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: PAGE 23 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1258.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4783.0

Amount of Each Receipt this Period
250.00

CONDUIT - EARMARKED CONTRIBUTIONS

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ROXANNE JUNGE

Mailing Address 1040 GLADISH LN

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
GLENVIEW NEW CHURCH SCHOOL
TEACHER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4373

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
KENNETH KAVANAUGH

Mailing Address 30 LOST BEACH LANE

City State Zip Code
VERO BEACH FL 32963

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

Name of Employer Occupation
RETIRED
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
09 / 30 / 2009

Transaction ID: SA11AI.4552

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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 / 65
(check only one)

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

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CYNTHIA L KEEGAN

Mailing Address 6510 SUMMERTON WAY

City State Zip Code
SPRINGFIELD VA 22150

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

Name of Employer: Natl Transportation Safety Brd Occupation: Senior Engineer

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

Date of Receipt: 09 / 22 / 2009
Transaction ID: SA11AI.4393
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
BEN KLEIN

Mailing Address 7444 LONG AVE

City State Zip Code
SKOKIE IL 60077

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

Name of Employer: PLATINUM HEALTHCARE LLC Occupation: PRINCIPAL

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

Date of Receipt: 09 / 14 / 2009
Transaction ID: SA11AI.4286
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
JAMES LACIVITA, Jr.

Mailing Address 3925 TRIUMVERA DR

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer: RETIRED Occupation: RETIRED

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

Date of Receipt: 09 / 23 / 2009
Transaction ID: SA11AI.4401
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 / 65
(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)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN M LEOVY
Mailing Address 4614 N LEAVITT ST
City CHICAGO State IL Zip Code 60625
FEC ID number of contributing federal political committee. **C**
Name of Employer CITY OF CHICAGO Occupation ATTORNEY
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 09 / 09 / 2009
Transaction ID: SA11AI.4263
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MARCENA LOVE
Mailing Address 1175 PELHAM RD
City WINNETKA State IL Zip Code 60093
FEC ID number of contributing federal political committee. **C**
Name of Employer NOT EMPLOYED Occupation COMMUNITY VOLUNTEER
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 30 / 2009
Transaction ID: SA11AI.4553
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
RALPH D LYNCH
Mailing Address 2229 WYNDANCE WAY
City NORTHBROOK State IL Zip Code 60062
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 09 / 14 / 2009
Transaction ID: SA11AI.4295
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00
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 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LISA MARVEL

Mailing Address P O BOX 1673

City HASTINGS State NE Zip Code 68902

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

Name of Employer SELF Occupation BOOKSTORE OWNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 29 / 2009
Transaction ID: SA11AI.4481
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
REBECCA MCLENNAN

Mailing Address 800 EASTWOOD LN

City GLENVIEW State IL Zip Code 60025

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

Name of Employer SELF Occupation HOMEMAKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: SA11AI.4542
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
LOUIS MERVIS

Mailing Address 201 N LOGAN AVE

City DANVILLE State IL Zip Code 61832

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: SA11AI.4556
 Amount of Each Receipt this Period: 500.00

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 27 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOSHUA MILLER
 Mailing Address 779 GREENWOOD AVE
 City State Zip Code
 GLENCOE IL 60022
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 30 / 2009
Transaction ID: SA11AI.4606
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 J P MORGAN PRIVATE CLIENT SERVICES
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
JAMES S MONTANA, Jr.
 Mailing Address 1938 N MAUD ST
 City State Zip Code
 CHICAGO IL 60614
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 10 / 2009
Transaction ID: SA11AI.4282
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VEDDER PRICE PC ATTORNEY
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
STEPHEN MORRILL
 Mailing Address 203 N LASALLE ST
 City State Zip Code
 CHICAGO IL 60601
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 29 / 2009
Transaction ID: SA11AI.4482
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MORRILL & ASSOCIATES PC ATTORNEY
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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 29 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MARGARETTAL PADUCH		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 36 APPLE BLOSSOM DR		Transaction ID: SA11AI.4795
	City W LEBANON	State NH	Zip Code 03784
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer RETIRED		EARMARKED - WISH LIST THE
Occupation RETIRED			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) WISH LIST, THE		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 333 N. Fairfax St. Suite 302		Transaction ID: SA11AI.4795.0
	City Alexandria	State VA	Zip Code 22314
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer		CONDUIT - EARMARKED CONTRIBUCTIONS
Occupation			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1683.00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CLARK PELLETT		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 680 N LAKE SHORE DR STE 1302		Transaction ID: SA11AI.4650
	City CHICAGO	State IL	Zip Code 60611
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer SELF		ATTORNEY
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	

SUBTOTAL of Receipts This Page (optional)	750.00
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 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS F PICK

Mailing Address 2100 DRURY LN

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: SA11AI.4510
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
WILLIAM H PRICE

Mailing Address 1587 LANCELOT

City HIGHLAND PARK State IL Zip Code 60035

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

Name of Employer I CARE SURGICAL ASSISTANCE INC Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 22 / 2009
Transaction ID: SA11AI.4394
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
JOSEPH J PROCHASKA, Jr.

Mailing Address 2325 BURR OAK RD

City NORTHFIELD State IL Zip Code 60093

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

Name of Employer METLIFE INC Occupation EXEC VP CHIEF ACCTG OFCR

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: SA11AI.4285
 Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► **3900.00**

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 31 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN R RAITT

Mailing Address 1111 MOHAWK RD

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
HARRIS ASSOCIATES LP INVESTMENT ANALYST

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.4424

Amount of Each Receipt this Period
2400.00

2400.00

B. Full Name (Last, First, Middle Initial)
JOHN REYNOLDS ROE

Mailing Address 1705 EXECUTIVE LN

City State Zip Code
GLENVIEW IL 60026

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

Name of Employer Occupation
SELF ATTORNEY

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4555

Amount of Each Receipt this Period
250.00

250.00

C. Full Name (Last, First, Middle Initial)
JEAN ANN ROMEO

Mailing Address 7 PRESCOTT SQUARE

City State Zip Code
BRONXVILLE NY 10708

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

Name of Employer Occupation
ELIZA CORWIN FROST CHILD CTR CO-DIRECTOR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2009

Transaction ID: SA11AI.4395

Amount of Each Receipt this Period
500.00

500.00

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 32 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ROBERT H ROSENFELD		Date of Receipt
	Mailing Address 6703 N CICERO AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2009
	City	State	Zip Code
	LINCOLNWOOD	IL	60712
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4531
Name of Employer ROBERT H ROSENFELD LLC		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) D Keith Ross		Date of Receipt
	Mailing Address P O Box 2850		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 21 / 2009
	City	State	Zip Code
	Evanston	WY	82931
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4352
Name of Employer Self		Occupation Physical Therapist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) ANNE ROSSITER		Date of Receipt
	Mailing Address 200 CLAIRE CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2009
	City	State	Zip Code
	GLENVIEW	IL	60025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4414
Name of Employer MIDWEST PALLIATIVE & HOSP-ICE		Occupation SR DIRECTOR OF PHILANTHROPY	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) CHARLES SAMPLE</p> <p>Mailing Address 800 FRONTAGE RD</p> <p>City State Zip Code NORTHFIELD IL 60093</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED 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>Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9</p> <p>Transaction ID: SA11AI.4453</p> <p>Amount of Each Receipt this Period 1000.00</p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼ 1000.00</p>	

<p>B. Full Name (Last, First, Middle Initial) FLOYD A SCHLOSSBERG</p> <p>Mailing Address 4200 W PETERSON AVE</p> <p>City State Zip Code CHICAGO IL 60646</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation ALDEN MGT SERVICES INC PRESIDENT</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>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9</p> <p>Transaction ID: SA11AI.4661</p> <p>Amount of Each Receipt this Period 1000.00</p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼ 1000.00</p>	

<p>C. Full Name (Last, First, Middle Initial) HARRY SEIGLE</p> <p>Mailing Address 1856 N MOHAWK ST</p> <p>City State Zip Code CHICAGO IL 60614</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation THE ELGIN COMPANY PRINCIPAL</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>Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9</p> <p>Transaction ID: SA11AI.4472</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼ 500.00</p>	

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 34 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ALEXANDER M SHAFERNICH		Date of Receipt
	Mailing Address 1832 DE COOK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 18 / 2009
	City	State	Zip Code
	PARK RIDGE	IL	60068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4307
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00

B.	Full Name (Last, First, Middle Initial) ALEXANDER M SHAFERNICH		Date of Receipt
	Mailing Address 1832 DE COOK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 18 / 2009
	City	State	Zip Code
	PARK RIDGE	IL	60068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4384
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 4800.00

C.	Full Name (Last, First, Middle Initial) MARK SHAFERNICH		Date of Receipt
	Mailing Address 7310 LINGAMORE CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2009
	City	State	Zip Code
	MCLEAN	VA	22102
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4391
Name of Employer Drug Enforcement Agency		Occupation Chief Technology Officer	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 7200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) MARK SHAFERNICH		Date of Receipt
	Mailing Address 7310 LINGAMORE CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2009
	City	State	Zip Code
	MCLEAN	VA	22102
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4392
Name of Employer Drug Enforcement Agency		Occupation Chief Technology Officer	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00
		<input type="text"/> 4800.00	

B.	Full Name (Last, First, Middle Initial) SANDRA SHAFERNICH		Date of Receipt
	Mailing Address 1832 DE COOK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 21 / 2009
	City	State	Zip Code
	PARK RIDGE	IL	60068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4345
Name of Employer SELF		Occupation ANTIQUA DEALER	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00
		<input type="text"/> 2400.00	

C.	Full Name (Last, First, Middle Initial) SANDRA SHAFERNICH		Date of Receipt
	Mailing Address 1832 DE COOK AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 21 / 2009
	City	State	Zip Code
	PARK RIDGE	IL	60068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4386
Name of Employer SELF		Occupation ANTIQUA DEALER	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00
		<input type="text"/> 4800.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 7200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHERI SMITH

Mailing Address 196 PARK AVE

City State Zip Code
GLENCOE IL 60022

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

Name of Employer SELF Occupation FINANCIAL PLANNER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.4590

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ROBERT SOUDAN

Mailing Address 110 SHERIDAN RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer BRB DEVELOPMENT Occupation REAL ESTATE DEVELOPER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.4522

Amount of Each Receipt this Period
2400.00

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SPENCE

Mailing Address 1130 N LAKE SHORE DR

City State Zip Code
CHICAGO IL 60611

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

Name of Employer FREEBORN & PETERS Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.4420

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
1000.00

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 37 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES SPRAYREGEN

Mailing Address 745 GREENWOOD AVE

City State Zip Code
GLENCOE IL 60022

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

Name of Employer Occupation
Kirkland & Ellis LLP Attorney

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.4353

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
HARRISON STEANS

Mailing Address 1900 MEADOW LN

City State Zip Code
BANOCKBURN IL 60015

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

Name of Employer Occupation
SELF INVESTOR

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2009

Transaction ID: SA11AI.4474

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
F QUINN STEPAN, Jr.

Mailing Address 1721 SHORE ACRES DR

City State Zip Code
LAKE BLUFF IL 60644

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

Name of Employer Occupation
STEPAN COMPANY CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4506

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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 38 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CANDACE L STRAIGHT

Mailing Address 518 E PASSAIC AVE

City BLOOMFIELD State NJ Zip Code 07003

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

Name of Employer SELF Occupation INVESTMENT BANKER

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: SA11AI.4805
 Amount of Each Receipt this Period: 500.00
 EARMARKED - WISH LIST THE

B. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St. Suite 302

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2283.00

Date of Receipt: 09 / 30 / 2009
Transaction ID: SA11AI.4805.0
 Amount of Each Receipt this Period: 500.00
 CONDUIT - EARMARKED CONTRIBUCTIONS
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
HERBERT F STRIDE

Mailing Address 1190 EDGEWOOD RD

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 23 / 2009
Transaction ID: SA11AI.4404
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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 39 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRISTINE M STROBEL

Mailing Address 45 WOODLEY RD

City State Zip Code
WINNETKA IL 60093

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

Name of Employer Self Occupation
Community Volunteer

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 23 / 2009

Transaction ID: SA11AI.4402

Amount of Each Receipt this Period
300.00

500.00

B. Full Name (Last, First, Middle Initial)
DAVID THOMPSON

Mailing Address 2400 S CULPEPER ST

City State Zip Code
ARLINGTON VA 22206

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

Name of Employer Occupation
CAPITOL HILL CONSULTING GROUP SR VP POLITICAL CONSULTANT

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2009

Transaction ID: SA11AI.4447

Amount of Each Receipt this Period
500.00

500.00

C. Full Name (Last, First, Middle Initial)
STEVEN WANNEMACHER

Mailing Address 23 MONARCH DR

City State Zip Code
BLOOMINGTON IL 61704

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

Name of Employer Occupation
HERITAGE ENTERPRISES PRESIDENT

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: SA11AI.4551

Amount of Each Receipt this Period
1000.00

1000.00

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRISTINE WHITMAN

Mailing Address P O BOX 146

City State Zip Code
OLDWICK NJ 08858

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

Name of Employer Occupation
WHITMAN STRATEGY GROUP PRESIDENT

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

Date of Receipt

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

Transaction ID: SA11AI.4403

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN WINKLER

Mailing Address 940 LEE ST

City State Zip Code
DES PLAINES IL 60016

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

Name of Employer Occupation
DES PLAINES EYE PHYSICIANS OPHTHALMOLOGIST

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

Date of Receipt

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

Transaction ID: SA11AI.4543

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
WILLIAM WOLF

Mailing Address 2430 N LAKEVIEW AVE

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Occupation
TALON ASSET MGT LLC COO & PORTFOLIO MGT

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

Date of Receipt

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

Transaction ID: SA11AI.4422

Amount of Each Receipt this Period
1400.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 41 / 65
	(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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CORINNE WOOD		Date of Receipt
	Mailing Address 191 N MAYFLOWER RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 23 / 2009
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4406
Name of Employer SELF		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) CORINNE WOOD		Date of Receipt
	Mailing Address 191 N MAYFLOWER RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2009
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4631
Name of Employer SELF		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00

C.	Full Name (Last, First, Middle Initial) CORINNE WOOD		Date of Receipt
	Mailing Address 191 N MAYFLOWER RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2009
	City	State	Zip Code
	LAKE FOREST	IL	60045
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4632
Name of Employer SELF		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 3400.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 65

(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
							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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
LAURA MARVEL WUNDERLICH

Mailing Address 1316 PERSHING RD

City	State	Zip Code
HASTINGS	NE	68901

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

Name of Employer HASTING COLLEGE	Occupation UNIVERSITY PROFESSOR
-------------------------------------	------------------------------------

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.4427

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

97000.00

**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 43 / 65
	<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE	Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 1201 L Street, NW	Transaction ID: SA11C.4664
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00006080	
	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	

B.	Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE	Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2009
	Mailing Address 1111 North Fairfax St.	Transaction ID: SA11C.4438
	City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00012880	
	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 ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)	Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 208 S. Akard Street Suite 3521	Transaction ID: SA11C.4538
	City Dallas State TX Zip Code 75202	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C C00109017	
	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	

SUBTOTAL of Receipts This Page (optional)	8000.00
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 44 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)
 Mailing Address 12176 Chancery Station Circle
 City Reston State VA Zip Code 20190
 Date of Receipt 09 / 25 / 2009
Transaction ID: SA11C.4439
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C** C00404392
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF TIM JOHNSON
 Mailing Address PO Box 17097
 City Urbana State IL Zip Code 61803
 Date of Receipt 09 / 29 / 2009
Transaction ID: SA11C.4903
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 1000.00

C. Full Name (Last, First, Middle Initial)
GOP GENERATION Y FUND
 Mailing Address PO BOX 9055
 City PEORIA State IL Zip Code 61612
 Date of Receipt 09 / 14 / 2009
Transaction ID: SA11C.4297
 Amount of Each Receipt this Period 5000.00
 FEC ID number of contributing federal political committee. **C** C00448191
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date 5000.00

SUBTOTAL of Receipts This Page (optional) ► 7000.00
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 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TURKISH COALITON USA PAC (TC-USA PAC)
Mailing Address 1025 CONNECTICUT AVE SUITE 1000
City WASHINGTON State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00432526
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 09 / 25 / 2009
Transaction ID: SA11C.4433
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS
Mailing Address PO Box 5458
PO BOX 5458
City Springfield State IL Zip Code 62705
FEC ID number of contributing federal political committee. **C** C00258855
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 14 / 2009
Transaction ID: SA11C.4298
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS
Mailing Address PO Box 5458
PO BOX 5458
City Springfield State IL Zip Code 62705
FEC ID number of contributing federal political committee. **C** C00258855
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 09 / 30 / 2009
Transaction ID: SA11C.4540
Amount of Each Receipt this Period 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 65
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7.40

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2009

Transaction ID: SA11C.4880

Amount of Each Receipt this Period
7.40

In-kind - Email Solicitation for Candidate

B. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 420.70

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: SA11C.4882

Amount of Each Receipt this Period
413.30

In-kind - Email Solicitation for Candidate

C. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 608.67

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: SA11C.4884

Amount of Each Receipt this Period
187.97

In-kind - Printing for Mailing

SUBTOTAL of Receipts This Page (optional) ► **608.67**

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 / 65
	(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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) WISH LIST, THE		Date of Receipt																				
Mailing Address 333 N. Fairfax St. Suite 302		<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>9</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>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	8		2	0	0	9													
City	State	Zip Code																				
Alexandria	VA	22314																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4886																				
C		Amount of Each Receipt this Period																				
		139.33																				
Name of Employer	Occupation	In-kind - Postage for Mailing																				
Receipt For: 2010	Election Cycle-to-Date ▼																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼	748.00																					

SUBTOTAL of Receipts This Page (optional)	▶	139.33
TOTAL This Period (last page this line number only)	▶	18248.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 65
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" 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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) ELIZABETH COULSON		Date of Receipt MM / DD / YYYY 08 / 24 / 2009
Mailing Address 1701 SEQUOIA TRAIL		Transaction ID: SA13A.4240
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C H0IL10294		Amount of Each Receipt this Period 30000.00
Name of Employer STATE OF ILLINOIS	Occupation STATE REPRESENTATIVE	Loan from Candidate
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 30000.00	

B.

Full Name (Last, First, Middle Initial) ELIZABETH COULSON		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 1701 SEQUOIA TRAIL		Transaction ID: SA13A.4241
City GLENVIEW	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C H0IL10294		Amount of Each Receipt this Period 20000.00
Name of Employer STATE OF ILLINOIS	Occupation STATE REPRESENTATIVE	Loan from Candidate
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50000.00	

SUBTOTAL of Receipts This Page (optional)	50000.00
TOTAL This Period (last page this line number only)	50000.00

**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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A T & T	Transaction ID: SB17.4710 Date of Disbursement 09 / 29 / 2009
	Mailing Address P O BOX 8100	Amount of Each Disbursement this Period 320.36
	City AURORA State IL Zip Code 60507	
	Purpose of Disbursement TELEPHONE EXP	001 Category/Type
	Candidate Name COULSON FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AWESOME GRAPHICS INC	Transaction ID: SB17.4894 Date of Disbursement 09 / 16 / 2009
	Mailing Address 1061 DAVIS RD	Amount of Each Disbursement this Period 2200.00
	City ELGIN State IL Zip Code 60123	
	Purpose of Disbursement FUNDRAISER INVITATIONS	003 Category/Type
	Candidate Name COULSON FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JENNIFER BELKOV	Transaction ID: SB17.4824 Date of Disbursement 08 / 28 / 2009
	Mailing Address 6444 LYONS ST	Amount of Each Disbursement this Period 1759.88
	City MORTON GROVE State IL Zip Code 60053	
	Purpose of Disbursement REIMB - Office Supplies Printing Postage	Category/Type
	Candidate Name COULSON FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4280.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
PROGRESS PRINTING CORP

Transaction ID: SB17.4824.0
Date of Disbursement

Mailing Address 3324 S HALSTED

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

City CHICAGO State IL Zip Code 60608

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
PRINTING

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
AWESOME GRAPHICS INC

Transaction ID: SB17.4824.1
Date of Disbursement

Mailing Address 1061 DAVIS RD

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

City ELGIN State IL Zip Code 60123

Amount of Each Disbursement this Period

387.00

Purpose of Disbursement
WINDOW SIGNS

006

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
OFFICEMAX

Transaction ID: SB17.4824.9
Date of Disbursement

Mailing Address 5507 W TOUHY AVE

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

City SKOKIE State IL Zip Code 60077

Amount of Each Disbursement this Period

636.87

Purpose of Disbursement
LAPTOP COMPUTER

001

Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JENNIFER BELKOV Mailing Address 6444 LYONS ST City MORTON GROVE State IL Zip Code 60053 Purpose of Disbursement In-kind - Fair Mkt Value of Computer Loan Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4889 Date of Disbursement 09 / 01 / 2009 Amount of Each Disbursement this Period 125.00 Category/Type 001
B.	Full Name (Last, First, Middle Initial) JENNIFER BELKOV Mailing Address 6444 LYONS ST City MORTON GROVE State IL Zip Code 60053 Purpose of Disbursement REIMB Office Supplies Furn Printing Candidate Name ELIZABETH COULSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4842 Date of Disbursement 09 / 05 / 2009 Amount of Each Disbursement this Period 1351.10 Category/Type
C.	Full Name (Last, First, Middle Initial) A T & T STORE Mailing Address 9725 SKOKIE BLVD City SKOKIE State IL Zip Code 60077 Purpose of Disbursement CELL PHONE Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4842.1 Date of Disbursement 09 / 05 / 2009 Amount of Each Disbursement this Period 279.38 Category/Type 001 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1476.10

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)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) A T & T STORE <hr/> Mailing Address 9725 SKOKIE BLVD <hr/> City SKOKIE State IL Zip Code 60077 <hr/> Purpose of Disbursement SERVICE CONTRACT Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4842.2 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 59.91
	[MEMO ITEM]
	Category/Type 001
B. Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement PHONES Candidate Name COULSON FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4842.3 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 879.84
	[MEMO ITEM]
	Category/Type 001
C. Full Name (Last, First, Middle Initial) JENNIFER BELKOV <hr/> Mailing Address 6444 LYONS ST <hr/> City MORTON GROVE State IL Zip Code 60053 <hr/> Purpose of Disbursement REIMBURSEMENT Candidate Name ELIZABETH COULSON <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1387.90
	[MEMO ITEM]
	Category/Type []

SUBTOTAL of Disbursements This Page (optional) ▶

1387.90

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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) OFFICEMAX Mailing Address 5507 W TOUHY AVE City SKOKIE State IL Zip Code 60077 Purpose of Disbursement OFFICE FURN, TONER, COPIER Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.1 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 532.45 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) STAPLES Mailing Address 1509 WAUKEGAN RD City GLENVIEW State IL Zip Code 60025 Purpose of Disbursement PAPER, OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.4 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 104.21 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) STAPLES Mailing Address 1509 WAUKEGAN RD City GLENVIEW State IL Zip Code 60025 Purpose of Disbursement PAPER Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.8 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.10 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 10.96
			[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) STAPLES <hr/> Mailing Address 1509 WAUKEGAN RD <hr/> City GLENVIEW State IL Zip Code 60025 <hr/> Purpose of Disbursement CAMPAIGN MATERIALS Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.11 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 76.43
			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) OFFICEMAX <hr/> Mailing Address 5507 W TOUHY AVE <hr/> City SKOKIE State IL Zip Code 60077 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4858.12 Date of Disbursement 09 / 30 / 2009	Amount of Each Disbursement this Period 49.24
			[MEMO ITEM]

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)

PAGE 55 / 65

<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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) BELLWEATHER RESEARCH & CONSULTING	Transaction ID: SB17.4699
	Mailing Address 804 N OVERLOOK DR	Date of Disbursement MM / DD / YYYY 09 / 18 / 2009
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period 13000.00
	Purpose of Disbursement TELEPHONE SURVEY Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 005
B.	Full Name (Last, First, Middle Initial) C3 SYSTEMS	Transaction ID: SB17.4682
	Mailing Address 331 VANCE ST	Date of Disbursement MM / DD / YYYY 09 / 05 / 2009
	City LOMBARD State IL Zip Code 60148	Amount of Each Disbursement this Period 718.00
	Purpose of Disbursement WEBSITE HOSTING Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
C.	Full Name (Last, First, Middle Initial) C3 SYSTEMS	Transaction ID: SB17.4684
	Mailing Address 331 VANCE ST	Date of Disbursement MM / DD / YYYY 09 / 05 / 2009
	City LOMBARD State IL Zip Code 60148	Amount of Each Disbursement this Period 280.07
	Purpose of Disbursement EMAIL TRANSACTION SERVICES Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶

13998.07

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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CHICAGO JEWISH NEWS THE	Transaction ID: SB17.4707 Date of Disbursement 09 / 29 / 2009
	Mailing Address 5301 W DEMPSTER	
	City SKOKIE State IL Zip Code 60077	Amount of Each Disbursement this Period 289.00
	Purpose of Disbursement DISPLAY ADVERTISING Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	004 Category/ Type
B.	Full Name (Last, First, Middle Initial) CHICAGO JEWISH NEWS THE	Transaction ID: SB17.4712 Date of Disbursement 09 / 30 / 2009
	Mailing Address 5301 W DEMPSTER	
	City SKOKIE State IL Zip Code 60077	Amount of Each Disbursement this Period 238.00
	Purpose of Disbursement DISPLAY ADVERTISING Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	004 Category/ Type
C.	Full Name (Last, First, Middle Initial) CHICAGO JEWISH STAR	Transaction ID: SB17.4702 Date of Disbursement 09 / 21 / 2009
	Mailing Address P O BOX 268	
	City SKOKIE State IL Zip Code 60076	Amount of Each Disbursement this Period 252.00
	Purpose of Disbursement DISPLAY ADVERTISING Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	004 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	779.00
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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
GOPgroup

Mailing Address 12404 HWY 155 S

City TYLER State TX Zip Code 75703

Purpose of Disbursement
BUMPER STICKERS LAPEL STICKERS

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4687
Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

584.06

B.

Full Name (Last, First, Middle Initial)
HACKNEYS ON LAKE

Mailing Address 1514 E LAKE AVE

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
FUNDRAISER EXP

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4763
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

650.00

C.

Full Name (Last, First, Middle Initial)
KAREN JACOBSEN

Mailing Address 1764 CANTERBURY TRAIL

City PALATINE State IL Zip Code 60074

Purpose of Disbursement
In-kind - Fair Mkt Value of Computer Equipment

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4892
Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1484.06

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)
COULSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) KSD PROPERTIES INC <hr/> Mailing Address 1955 SHERMER RD <hr/> City NORTHBROOK State IL Zip Code 60062 <hr/> Purpose of Disbursement RENT SEPT 2009 Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.4675 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00
B.	Full Name (Last, First, Middle Initial) KSD PROPERTIES INC <hr/> Mailing Address 1955 SHERMER RD <hr/> City NORTHBROOK State IL Zip Code 60062 <hr/> Purpose of Disbursement SECURITY DEPOSIT Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.4677 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00
C.	Full Name (Last, First, Middle Initial) MICHAEL MOLNAR <hr/> Mailing Address 2558 W HURON <hr/> City CHICAGO State IL Zip Code 60612 <hr/> Purpose of Disbursement PHOTOGRAPHY Candidate Name COULSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 10	Transaction ID: SB17.4680 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 400.00

SUBTOTAL of Disbursements This Page (optional)	6400.00
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)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NYHAN DANIELS & FRIENDS LLC

Mailing Address 1844 WILDBERRY DR

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement

FUNDRAISING

003
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.4693

Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

3000.00

B. Full Name (Last, First, Middle Initial)
STAPLES

Mailing Address 1509 WAUKEGAN RD

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement

OFFICE SUPPLIES

006
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.4695

Date of Disbursement

09 / 08 / 2009

Amount of Each Disbursement this Period

53.62

C. Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

In-kind - Email Solicitation for Candidate

003
Category/
Type

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Transaction ID: SB17.4883

Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

413.30

SUBTOTAL of Disbursements This Page (optional) ▶

3466.92

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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
In-kind - Printing for Mailing

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4885
Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

187.97

B.

Full Name (Last, First, Middle Initial)
WISH LIST, THE

Mailing Address 333 N. Fairfax St.
Suite 302

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
In-kind - Postage for Mailing

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4887
Date of Disbursement

09 / 18 / 2009

Amount of Each Disbursement this Period

139.33

C.

Full Name (Last, First, Middle Initial)
JOE WOODWARD

Mailing Address 6948 40TH PL

City BERWYN State IL Zip Code 60402

Purpose of Disbursement
CAMPAIGN WORK

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President

State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB17.4678
Date of Disbursement

09 / 01 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2327.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 / 65

<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)
COULSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JOE WOODWARD

Mailing Address 6948 40TH PL

City State Zip Code
BERWYN IL 60402

Purpose of Disbursement
CAMPAIGN WORK

Candidate Name
COULSON FOR CONGRESS

Office Sought: House
 Senate
 President
State: IL District: 10

Disbursement For: 2010
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.4692
Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

37599.59

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 63 / 65
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

LOANS

NAME OF COMMITTEE (In Full)
 COULSON FOR CONGRESS

Transaction ID: SC/10.4240

LOAN SOURCE Full Name (Last, First, Middle Initial) ELIZABETH COULSON - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1701 SEQUOIA TRAIL	
City GLENVIEW State IL ZIP Code 60025	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 08 D D 24 Y Y Y Y 2009	12/31/2012	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	30000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

Transaction ID: SC/10.4241

LOAN SOURCE Full Name (Last, First, Middle Initial) ELIZABETH COULSON - [PERSONAL FUNDS]		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1701 SEQUOIA TRAIL		
City GLENVIEW	State IL	ZIP Code 60025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred M M D D Y Y Y Y 09 25 2009	Date Due 12/31/2012	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	------------------------	---------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	20000.00
TOTALS This Period (last page in this line only)	50000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
COULSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MASTERCARD			Nature of Debt (Purpose): AIRLINE TRAVEL TICKETS
Mailing Address BOX 6062			
City SIOUX FALLS	State SD	ZIP Code 57117	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4897	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
682.40	0.00	682.40	

1) SUBTOTALS This Period This Page (optional).....	▶	682.40
2) TOTALS This Period (last page this line number only).....	▶	682.40
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	50000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	50682.40