

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
CITIZENS FOR RUSH

ADDRESS (number and street) P, O, Box 7292
 Check if different than previously reported. (ACC)
CHICAGO IL 60680 7292

2. **FEC IDENTIFICATION NUMBER** C00257121
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
IL 01

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 02 05 2008 in the State of IL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2007 through 01 16 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Sheila L. Jackson
Signature of Treasurer Electronically Filed by Sheila L. Jackson Date 03 13 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CITIZENS FOR RUSH

Report Covering the Period:

From:

M M
1 0

D D
0 1

Y Y Y Y
2 0 0 7

To:

M M
0 1

D D
1 6

Y Y Y Y
2 0 0 8

	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)).....	69053.00	293689.94
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	69053.00	292689.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	52640.04	186991.79
(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)).....	52640.04	186991.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	113740.97	
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).....	23489.43	

For further information contact:

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
CITIZENS FOR RUSH

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
1	6

Y	Y	Y	Y
2	0	0	8

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	34480.00	134530.00
(i) Itemized (use Schedule A).....	650.00	6275.00
(ii) Unitemized.....	35130.00	140805.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	11.94
(b) Political Party Committees.....	33923.00	152873.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	69053.00	293689.94
(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.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	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)..... ▶	69053.00	293689.94

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52640.04	186991.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS.....	21600.00	51545.08
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	74240.04	239536.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	118928.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	69053.00
25. SUBTOTAL (add Line 23 and Line 24).....	187981.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74240.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	113740.97

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate BOBBY LEE RUSH		Candidate ID Number H2IL01042
Name of Principal Campaign Committee CITIZENS FOR RUSH		Committee ID Number C C00257121
Committee Address P. O. Box 7292		
City CHICAGO	State IL	ZIP 60680-7292
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	293689.94	6000.00
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00
3. Gross receipts minus the candidate's personal contributions	293689.94	6000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 61
(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)
CITIZENS FOR RUSH

<p>A. Full Name (Last, First, Middle Initial) Trevor L. Ahlberg</p> <p>Mailing Address 4725 Windsor Ridge Dr.</p> <p>City Irving State TX Zip Code 75038</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Cottonwood Financial Occupation Chief Executive Officer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 27 / 2007</p> <p>Transaction ID: SA11AI.12733</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Daniel J. Antolak</p> <p>Mailing Address 525 W. Superior Street Apt 229</p> <p>City Chicago State IL Zip Code 60610-3135</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Business Owner Occupation FASTSIGNS</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 29 / 2007</p> <p>Transaction ID: SA11AI.12766</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Reuben Ballis</p> <p>Mailing Address 321 N. Clark Street Suite 1800</p> <p>City Chicago State IL Zip Code 60610</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Mesirow Financial Occupation Executive</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 29 / 2007</p> <p>Transaction ID: SA11AI.12803</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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 7 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Irv Barr

Mailing Address **180 East Pearson Street**

City **Chicago** State **IL** Zip Code **60611**

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

Name of Employer **SFF** Occupation **Manager**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **11 / 29 / 2007**
Transaction ID: SA11AI.12762
 Amount of Each Receipt this Period **500.00**

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

B. Full Name (Last, First, Middle Initial)
Richard Barr

Mailing Address **425 Huehl Road Building #3**

City **Northbrook** State **IL** Zip Code **60062**

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

Name of Employer **R & L Management Co, Inc** Occupation **Businessman**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **11 / 29 / 2007**
Transaction ID: SA11AI.12831
 Amount of Each Receipt this Period **500.00**

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

C. Full Name (Last, First, Middle Initial)
Fred M. Broda

Mailing Address **415 East Mc Kone CT**

City **Arlington Court** State **IL** Zip Code **60005**

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

Name of Employer **The Horton Group** Occupation **Vice President**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **11 / 29 / 2007**
Transaction ID: SA11AI.12796
 Amount of Each Receipt this Period **500.00**

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

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 8 / 61
(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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial) Steven G. Brubaker		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 25 Woodland Trail		Transaction ID: SA11AI.12792
City Rochester	State IL	Zip Code 62563
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Brubaker Public Relations, Inc	Occupation Business Owner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) John M. Clark		Date of Receipt MM / DD / YYYY 10 / 13 / 2007
Mailing Address 6741 S. Cregier Avenue		Transaction ID: SA11AI.12861
City Chicago	State IL	Zip Code 60649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Reggio's Pizza, Inc.	Occupation President/CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) John M. Clark		Date of Receipt MM / DD / YYYY 10 / 13 / 2007
Mailing Address 6741 S. Cregier Avenue		Transaction ID: SA11AI.12862
City Chicago	State IL	Zip Code 60649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Reggio's Pizza, Inc.	Occupation President/CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	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: (check only one)	PAGE 9 / 61
	<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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Darlene Costantini	Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 901 Westover Road	Transaction ID: SA11AI.12813
	City State Zip Code Stamford CT 06902	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Requested Occupation Requested Receipt For: 2008 <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) Thomas DiPlazza	Date of Receipt MM / DD / YYYY 12 / 20 / 2007
	Mailing Address 319 West 29th Street	Transaction ID: SA11AI.12742
	City State Zip Code Chicago IL 60616-2616	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Requested Occupation Requested Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) Wendy Eager	Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address Not Available	Transaction ID: SA11AI.12817
	City State Zip Code Chicago IL 60600	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Requested Occupation Requested Not Available Receipt For: 2008 <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)	3800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Patrick Fitzgerald

Mailing Address 4613 N. Hermitage

City Chicago State IL Zip Code 60640

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

Name of Employer Fitzgerald Associated Occupation Builder/Designer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 14 / 2007

Transaction ID: SA11AI.12852

Amount of Each Receipt this Period: 500.00

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

B. Full Name (Last, First, Middle Initial)
Michael E. Frayzel

Mailing Address 100 W. Monroe Suite 1900

City Chicago State IL Zip Code 60603

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

Name of Employer SELF Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 29 / 2007

Transaction ID: SA11AI.12778

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Gary Gagerman

Mailing Address 425 Huehl Road Building #2

City Northbrook State IL Zip Code 60062

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

Name of Employer CHECKCHANGERS Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 29 / 2007

Transaction ID: SA11AI.12833

Amount of Each Receipt this Period: 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Jerome S. Gagerman

Mailing Address 425 Huehl Road
Building #2

City Northbrook State IL Zip Code 60062

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

Name of Employer Financial Clearings, Inc. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 29 / 2007

Transaction ID: SA11AI.12832

Amount of Each Receipt this Period: 250.00

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

B. Full Name (Last, First, Middle Initial)
Marvin Goldzweig

Mailing Address 950 N. Michigan Ave.
Apt 3902

City Chicago State IL Zip Code 60611

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

Name of Employer SELF EMPLOYED Occupation MANUFACTURE

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 29 / 2007

Transaction ID: SA11AI.12836

Amount of Each Receipt this Period: 2000.00

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

C. Full Name (Last, First, Middle Initial)
Kelby Hagar

Mailing Address 6016 Park Lane

City Dallas State TX Zip Code 75225

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

Name of Employer Requested Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 29 / 2007

Transaction ID: SA11AI.12774

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3250.00**

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 12 / 61
	<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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) William J. Hargett		Date of Receipt MM / DD / YYYY 10 / 26 / 2007
	Mailing Address 1968 Crescent Park Drive		Transaction ID: SA11AI.12758
	City Reston	State VA	Zip Code 20190
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Hargett Consulting	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) Louis S. Harrison		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 582 Woodlawn Ave.		Transaction ID: SA11AI.12811
	City Glencoe	State IL	Zip Code 60022
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Requested	Occupation Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

C.	Full Name (Last, First, Middle Initial) M Joan Hefner		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
	Mailing Address 3130 Lady Marian Lane		Transaction ID: SA11AI.12746
	City Midlothian	State VA	Zip Code 23113
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer REQUESTED	Occupation REQUESTED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	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 13 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

Mailing Address 1400 E. Touhy Ave.
Suite 100

City State Zip Code
DesPlaines IL 60018

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

Name of Employer Occupation
West Surban Currency Exchanges Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA11AI.12808

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
John T. Hooker

Mailing Address 1306 S. Plymouth Ct.

City State Zip Code
Chicago IL 60605

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

Name of Employer Occupation
Commonwealth Edison Senior Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 12 / 2007

Transaction ID: SA11AI.13067

Amount of Each Receipt this Period
-1000.00

STOPPED PAYMENT

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

C. Full Name (Last, First, Middle Initial)
Joseph R. Indovina

Mailing Address 1855 Wilson Place

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Occupation
CBIZ Benefits & Insurance Serv Senior Benefit Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA11AI.12782

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 61
(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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Michael B. Jakubier

Mailing Address 1900 Wisterua #6

City Naperville State IL Zip Code 60565

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

Name of Employer SELF Occupation Business Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 29 / 2007

Transaction ID: SA11AI.12776

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Robert E. Juliano

Mailing Address 1099 22nd Street, N.W. Suite 802

City Washington State DC Zip Code 20037

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

Name of Employer Requested Occupation Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1430.00

Date of Receipt 10 / 23 / 2007

Transaction ID: SA11AI.12723

Amount of Each Receipt this Period 1430.00

In-kind - Sesto Sento Res-t. - Fundraisin
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Harlan D. Kahn

Mailing Address 154 Edgecliff Dr.

City Highland Park State IL Zip Code 60035

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

Name of Employer Bronson & Kahn, LLC Occupation Attorney

Receipt For: 2007
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 27 / 2007

Transaction ID: SA11AI.12737

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2930.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 61
(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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial) Robert J. Kunkel		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 506 Uvedale Road		Transaction ID: SA11AI.12798
City Riverside	State IL	Zip Code 60546
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Graphics 2000	Occupation President/Sales	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) Carl A. La Susa		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
Mailing Address 6346 N. Mobile Ave.		Transaction ID: SA11AI.12735
City Chicago	State IL	Zip Code 60646
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Michael J. Lynch		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 3312 W Belle Plaine		Transaction ID: SA11AI.12780
City Chicago	State IL	Zip Code 60618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Banco Popular	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	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 16 / 61
(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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial) Gary A. Mages		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 3821 Charles Drive		Transaction ID: SA11AI.12784
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mages & Price	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) Mark J. Matuscak		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 3928 N. Marshfield Ave.		Transaction ID: SA11AI.12819
City Chicago	State IL	Zip Code 60613-2516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Requested	Occupation Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Craig McCrohon		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 330 S. Michigan Apt 1701		Transaction ID: SA11AI.12821
City Chicago	State IL	Zip Code 60604
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Requested	Occupation Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	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 17 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Carol W. Molski

Mailing Address 21768 Cappel Lane

City State Zip Code
Frankfort IL 60423

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

Name of Employer Occupation
WhitComm Marketing, Inc. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.12835

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Martin R. Nagel

Mailing Address 520 Jackson Ave.

City State Zip Code
Glencoe IL 60022

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

Name of Employer Occupation
Pacetel, Inc Self Employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.12790

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Vicky Palivos

Mailing Address 1700 S. Braymore Drive

City State Zip Code
Inverness IL 60010

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

Name of Employer Occupation
Coldwell Banker Residential Br Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.12744

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 61
(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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Mamon M. Powers, Jr.

Mailing Address 2636 West 15th Avenue

City State Zip Code
Gary IN 46404-2125

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

Name of Employer Powers & Sons Construction Co.
Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
10 / 13 / 2007

Transaction ID: SA11AI.12850

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Marc Price

Mailing Address 55 Newton Drive

City State Zip Code
Buffalo Grove IL 60089

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

Name of Employer Mages and Price
Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA11AI.12788

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Everett G. Rand

Mailing Address 5508 State Street

City State Zip Code
Chicago IL 60621

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

Name of Employer Midway Airport Concessionaires
Occupation Liquor Distributor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
12 / 20 / 2007

Transaction ID: SA11AI.12741

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 61
	<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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Jeffery D. Silverman	Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 790 Estate Drive	Transaction ID: SA11AI.12815
	City State Zip Code Deerfield IL 60015	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation USA Checks Cashed President	
Receipt For: 2008 <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) Ronald S. Slager	Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 7722 Marquette Drive South	Transaction ID: SA11AI.12794
	City State Zip Code Tinley Park IL 60477	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation C312 Accounting, Tax & Adviso CPA	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Larry Slonina	Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 425 Huehl Road	Transaction ID: SA11AI.12760
	City State Zip Code Northbrook IL 60062	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation U.S. Advisory Services, Inc. Consultant	
Receipt For: 2008 <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)	▶	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 20 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
William Spathies

Mailing Address 954 W. Washington

City State Zip Code
Chicago IL 60607

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

Name of Employer Occupation
Spathies Construction Corp General Contractor-Builder

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: SA11AI.12748

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Joel Stein

Mailing Address 2750 Hurd Ave.

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
S. Stein & Co. Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: SA11AI.12764

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Adam H. Stienberg

Mailing Address P.O. Box 8571

City State Zip Code
Northfield IL 60093

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

Name of Employer Occupation
Requested Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: SA11AI.12806

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
Craig A. Varga

Mailing Address 2129 N. Cleveland Avenue

City State Zip Code
Chicago IL 60614

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

Name of Employer
Varga, Berger, Ledsky, Hayes &
Occupation
Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.12804

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Kevin Viana

Mailing Address 36 Forest Valley Road

City State Zip Code
Pleasant Valley NY 12569

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

Name of Employer
Marshall & Sterling
Occupation
Insurance

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.12830

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Sam Vinson

Mailing Address 70 W Madison Street
Suite 3500

City State Zip Code
Chicago IL 60602

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

Name of Employer
Urgaretti & Harris
Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.12745

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 61
	<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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Benjamin Wernick		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 1089 Ridgewood Drive		Transaction ID: SA11AI.12786
	City Highland Park	State IL	Zip Code 60035-4023
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer CDW	Occupation Account Manager	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) Lisa Williams		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
	Mailing Address 4157 S. Calumet		Transaction ID: SA11AI.13068
	City Chicago	State IL	Zip Code 60653
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -1000.00
	Name of Employer Requested	Occupation Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00		

C.	Full Name (Last, First, Middle Initial) Micheal Wirth		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 285 Briar Lane		Transaction ID: SA11AI.12772
	City Highland Park	State IL	Zip Code 60035
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <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)	500.00
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 / 61
	(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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial) Joseph B. Wolfberg		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
Mailing Address 1210 Whitebridge Hill Road		Transaction ID: SA11AI.12834
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer PLS Financial	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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) Brad A. Zerman		Date of Receipt MM / DD / YYYY 12 / 04 / 2007
Mailing Address 1419 W. Bell Plaine		Transaction ID: SA11AI.12753
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Qualtex, Corp	Occupation PRESIDENT/OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <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)	1000.00
TOTAL This Period (last page this line number only)	34480.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 61
(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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
ACE CASH EXPRESS INC PAC

Mailing Address 1231 Greenway Drive
Suite 600

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00392290

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 29 / 2007
Transaction ID: SA11C.12801
 Amount of Each Receipt this Period 500.00

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

B. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW
8th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 11 / 07 / 2007
Transaction ID: SA11C.12722
 Amount of Each Receipt this Period 2500.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 1050 31st Street N.W.

City Washington State DC Zip Code 20007

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 14 / 2007
Transaction ID: SA11C.12865
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 61
(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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES' POLITICAL ACTION COMMITTEE

Date of Receipt: MM / DD / YYYY
12 / 31 / 2007

Mailing Address 80 F STREET N W

Transaction ID: SA11C.12848

City WASHINGTON State DC Zip Code 20001

Amount of Each Receipt this Period: 500.00

FEC ID number of contributing federal political committee: **C** C00009936

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

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

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

Date of Receipt: MM / DD / YYYY
01 / 07 / 2008

Mailing Address 1500 Market Street
35th Floor

Transaction ID: SA11C.12837

City Philadelphia State PA Zip Code 19102

Amount of Each Receipt this Period: 3000.00

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 4000.00

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

C. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Date of Receipt: MM / DD / YYYY
12 / 31 / 2007

Mailing Address 400 South Tryon Street ST06F

Transaction ID: SA11C.12846

City Charlotte State NC Zip Code 28285

Amount of Each Receipt this Period: 1000.00

FEC ID number of contributing federal political committee: **C** C00083535

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 26 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
ENERGY CORPORATION POLITICAL ACTION COMMITTEE 'ENPAC'

Mailing Address 425 West Capitol Avenue Suite 40B

City State Zip Code
Little Rock AR 72203

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.12718

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICE CENTERS OF AMERICA INC.

Mailing Address Court Plaza No. 25 Main St
PO Box 647

City State Zip Code
Hackensack NJ 07602

FEC ID number of contributing federal political committee. **C** C00232843

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: SA11C.12769

Amount of Each Receipt this Period
 2000.00

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

C. Full Name (Last, First, Middle Initial)
IRONWORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 NY AVE, NW SUITE 400

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11C.12720

Amount of Each Receipt this Period
 2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA
 Mailing Address 905 16TH STREET, N.W.
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00007922
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt 12 / 24 / 2007
Transaction ID: SA11C.12839
 Amount of Each Receipt this Period 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MOTOROLA INC. POLITICAL ACTION COMMITTEE
 Mailing Address 1350 I Street N.W. Suite 400
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00075341
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
 Date of Receipt 12 / 24 / 2007
Transaction ID: SA11C.12840
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NATIONAL CABLE TELEVISION ASSOCIATION'S POLITICAL ACTION COMMITTEE (CABLE PAC)
 Mailing Address 1724 MASSACHUSETTS AVENUE NW
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00010082
 Name of Employer Occupation
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt 12 / 13 / 2007
Transaction ID: SA11C.12715
 Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 9000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 28 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M Street NW Suite 540

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 19 / 2007

Transaction ID: SA11C.12756

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 Park Plaza

City State Zip Code
Newark NJ 07102

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 07 / 2007

Transaction ID: SA11C.12716

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS INTERNAT'L UNION OF NA-AGLIWD DISTRICT

Mailing Address 5201 AUTH WAY

City State Zip Code
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2007

Transaction ID: SA11C.12757

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
SEARS POLITICAL ACTION COMMITTEE

Mailing Address 3333 BEVERLY ROAD BSC: B5-114B

City State Zip Code
HOFFMAN ESTATES IL 60179

FEC ID number of contributing federal political committee. **C** C00038612

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: SA11C.12838

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 270 PEACHTREE STREET

City State Zip Code
ATLANTA GA 30303

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.12752

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED POLITICAL FUND

Mailing Address 9900 BREN ROAD EAST
9900 BREN ROAD EAST

City State Zip Code
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2423.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11C.12845

Amount of Each Receipt this Period
2423.00

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

SUBTOTAL of Receipts This Page (optional) ► **4423.00**

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 / 61
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial) VERIZON COMMUNICATIONS INC GOOD GOVERNMENT CLUB (FKA BELL ATLANTIC CORPORATION)		Date of Receipt
Mailing Address 1717 ARCH STREET 47TH FL S		M M / D D / Y Y Y Y Y 1 2 / 2 8 / 2 0 0 7
City	State	Zip Code
PHILADELPHIA	PA	19103
FEC ID number of contributing federal political committee.	C C00186288	
Name of Employer	Occupation	
Receipt For: 2008	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	4000.00	
		Transaction ID: SA11C.12841
		Amount of Each Receipt this Period
		3000.00
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial) XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1225 17TH STREET, SUITE 1200 Suite 900		M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 7
City	State	Zip Code
DENVER	CO	80202
FEC ID number of contributing federal political committee.	C C00107771	
Name of Employer	Occupation	
Receipt For: 2008	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1000.00	
		Transaction ID: SA11C.12750
		Amount of Each Receipt this Period
		1000.00
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	33923.00

**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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) ADT Security	Transaction ID: SB17.13074	
	Mailing Address Not Available	Date of Disbursement 01 / 04 / 2008	
	City Chicago State IL Zip Code 60600	Amount of Each Disbursement this Period 151.75	
	Purpose of Disbursement SECURITY SYSTEM Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Robyn Alexander	Transaction ID: SB17.12906	
	Mailing Address 6136 Stonehenge Place	Date of Disbursement 11 / 16 / 2007	
	City Rockville State MD Zip Code 20852	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Fee for CHEF Candidate Name	Category/Type 003 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Robert L. Anderson	Transaction ID: SB17.12989	
	Mailing Address 7328 S. Constance	Date of Disbursement 10 / 30 / 2007	
	City Chicago State IL Zip Code 60649	Amount of Each Disbursement this Period 200.00	
	Purpose of Disbursement Notary Pulbic Services Candidate Name	Category/Type 005 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	851.75
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

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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Robert L. Anderson

Mailing Address 7328 S. Constance

City Chicago State IL Zip Code 60649

Purpose of Disbursement
Notary Public Services

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12987
Date of Disbursement

11 / 03 / 2007

Amount of Each Disbursement this Period

100.00

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

B.

Full Name (Last, First, Middle Initial)
A T & T

Mailing Address Bill Payment Center

City Chicago State IL Zip Code 60600

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.13071
Date of Disbursement

01 / 04 / 2008

Amount of Each Disbursement this Period

1730.68

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

C.

Full Name (Last, First, Middle Initial)
Orlando Brown

Mailing Address P.O. Box 379124

City Chicago State IL Zip Code 60600

Purpose of Disbursement
PETITION CIRCULATOR

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12997
Date of Disbursement

10 / 20 / 2007

Amount of Each Disbursement this Period

140.00

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

SUBTOTAL of Disbursements This Page (optional)

1970.68

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Orlando Brown Mailing Address P.O. Box 379124 City Chicago State IL Zip Code 60600 Purpose of Disbursement PETITION CIRCULATOR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12994 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Orlando Brown Mailing Address P.O. Box 379124 City Chicago State IL Zip Code 60600 Purpose of Disbursement PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12956 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 7	Amount of Each Disbursement this Period 123.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Chatham Business Association Mailing Address 8441 S. Cottage Grove City Chicago State IL Zip Code 60619 Purpose of Disbursement ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13083 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 8	Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	873.00
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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) ComEd	Transaction ID: SB17.13064 Date of Disbursement
	Mailing Address Bill Payment Center	<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Chicago State IL Zip Code 60600	Amount of Each Disbursement this Period
	Purpose of Disbursement Electricity	<input type="text" value="453.63"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ComEd	Transaction ID: SB17.13075 Date of Disbursement
	Mailing Address Bill Payment Center	<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60600	Amount of Each Disbursement this Period
	Purpose of Disbursement ELECTRICITY	<input type="text" value="66.98"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) COSTCO WHOLESALE	Transaction ID: SB17.13077 Date of Disbursement
	Mailing Address LINCOLN PARK	<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City CHICAGO State IL Zip Code 60600	Amount of Each Disbursement this Period
	Purpose of Disbursement PAPER & OFFICE SUPPLIES	<input type="text" value="486.92"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1007.53"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
COSTCO WHOLESALE

Mailing Address LINCOLN PARK

City CHICAGO State IL Zip Code 60600

Purpose of Disbursement
Office Equipment & Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12909
Date of Disbursement

11 / 20 / 2007

Amount of Each Disbursement this Period

1596.71

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

B.

Full Name (Last, First, Middle Initial)
Double Tree Hotel Alsip Chicago

Mailing Address 5000 West 127th Street

City Alsip State IL Zip Code 60803

Purpose of Disbursement
Room Rental & Catering

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12894
Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

2318.83

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

C.

Full Name (Last, First, Middle Initial)
Lamoune Glover

Mailing Address 6425 S. Lowe

City Chicago State IL Zip Code 60621

Purpose of Disbursement
Office Cleaning

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12929
Date of Disbursement

10 / 09 / 2007

Amount of Each Disbursement this Period

210.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

4125.54

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Lamoune Glover Mailing Address 6425 S. Lowe City Chicago State IL Zip Code 60621 Purpose of Disbursement Office Cleaning Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12927 Date of Disbursement 10 / 18 / 2007 Amount of Each Disbursement this Period 240.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Lamoune Glover Mailing Address 6425 S. Lowe City Chicago State IL Zip Code 60621 Purpose of Disbursement Office Cleaning Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12915 Date of Disbursement 11 / 03 / 2007 Amount of Each Disbursement this Period 240.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Lamoune Glover Mailing Address 6425 S. Lowe City Chicago State IL Zip Code 60621 Purpose of Disbursement Office & Premises Cleaning & Maint Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12917 Date of Disbursement 11 / 03 / 2007 Amount of Each Disbursement this Period 2382.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2862.00

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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Lamoune Glover

Mailing Address 6425 S. Lowe

City Chicago State IL Zip Code 60621

Purpose of Disbursement
Office Cleaning

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12896
Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

210.00

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

B.

Full Name (Last, First, Middle Initial)
Lamoune Glover

Mailing Address 6425 S. Lowe

City Chicago State IL Zip Code 60621

Purpose of Disbursement
OFFICE CLEANING

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12886
Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

240.00

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

C.

Full Name (Last, First, Middle Initial)
Lamoune Glover

Mailing Address 6425 S. Lowe

City Chicago State IL Zip Code 60621

Purpose of Disbursement
Office Cleaning

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12878
Date of Disbursement

12 / 28 / 2007

Amount of Each Disbursement this Period

240.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

690.00

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Lamoune Glover Mailing Address 6425 S. Lowe City Chicago State IL Zip Code 60621 Purpose of Disbursement Office Cleaning Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12866 Date of Disbursement 01 / 16 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Denise Corder Hall Mailing Address 14815 Artesian Ave. City Harvey State IL Zip Code 60426 Purpose of Disbursement Invitations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12914 Date of Disbursement 11 / 11 / 2007 Amount of Each Disbursement this Period 355.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Denise Corder Hall Mailing Address 14815 Artesian Ave. City Harvey State IL Zip Code 60426 Purpose of Disbursement Printing/invitations & reply cards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12891 Date of Disbursement 12 / 06 / 2007 Amount of Each Disbursement this Period 181.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	787.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Carl Hamilton	Transaction ID: SB17.12983 Date of Disbursement 10 / 30 / 2007
	Mailing Address 7023 S. Dante Ave.	Amount of Each Disbursement this Period 350.00
	City Chicago State IL Zip Code 60637	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Petition/Polling circulator Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

B.	Full Name (Last, First, Middle Initial) Carl Hamilton	Transaction ID: SB17.12984 Date of Disbursement 11 / 03 / 2007
	Mailing Address 7023 S. Dante Ave.	Amount of Each Disbursement this Period 220.00
	City Chicago State IL Zip Code 60637	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PETITION/CIRCULATOR/POLLING Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

C.	Full Name (Last, First, Middle Initial) Keith Harris	Transaction ID: SB17.13085 Date of Disbursement 11 / 30 / 2007
	Mailing Address 8412 S. Cottage Grove	Amount of Each Disbursement this Period 560.00
	City Chicago State IL Zip Code 60619	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement petition drive/binder check Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	▶	1130.00
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 40 / 61

<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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Keith Harris	Transaction ID: SB17.13089 Date of Disbursement 12 / 08 / 2007
	Mailing Address 8412 S. Cottage Grove	Amount of Each Disbursement this Period 315.00
	City Chicago State IL Zip Code 60619	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Petition Drive/Binder Check - Polling Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

B.	Full Name (Last, First, Middle Initial) Keith Harris	Transaction ID: SB17.13090 Date of Disbursement 12 / 08 / 2007
	Mailing Address 8412 S. Cottage Grove	Amount of Each Disbursement this Period 350.00
	City Chicago State IL Zip Code 60619	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement binder check/petition check Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

C.	Full Name (Last, First, Middle Initial) Keith Harris	Transaction ID: SB17.13092 Date of Disbursement 12 / 09 / 2007
	Mailing Address 8412 S. Cottage Grove	Amount of Each Disbursement this Period 290.00
	City Chicago State IL Zip Code 60619	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement petition drive/binder check Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		005 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

955.00

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Stephanie A. Henson-Gadlin <hr/> Mailing Address 1400 W. 73rd Place <hr/> City Chicago State IL Zip Code 60636 <hr/> Purpose of Disbursement Media Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12876 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) J & J Carwash <hr/> Mailing Address 349 East 31st Street <hr/> City Chicago State IL Zip Code 60616 <hr/> Purpose of Disbursement Annual Caring Wash Fee-Member Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12904 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 800.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Sheila L. Jackson <hr/> Mailing Address P.O. Box 7292 <hr/> City Chicago State IL Zip Code 60680-7292 <hr/> Purpose of Disbursement Accounting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12890 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 7 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	3300.00
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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Jerome Jones

Mailing Address 4412 S. Drexel Blvd.

City Chicago State IL Zip Code 60653

Purpose of Disbursement
Circulate Petitions/Polling

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.13017
Date of Disbursement

10 / 27 / 2007

Amount of Each Disbursement this Period

570.00

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

B.

Full Name (Last, First, Middle Initial)
Jerome Jones

Mailing Address 4412 S. Drexel Blvd.

City Chicago State IL Zip Code 60653

Purpose of Disbursement
Petition Circulation - Polling

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12985
Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

510.00

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

C.

Full Name (Last, First, Middle Initial)
Robert E. Juliano

Mailing Address 1099 22nd Street, N.W.
Suite 802

City Washington State DC Zip Code 20037

Purpose of Disbursement
In-kind - Sesto Sento Rest. - Fundraisin

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12725
Date of Disbursement

10 / 23 / 2007

Amount of Each Disbursement this Period

1430.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2510.00

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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Lily White Products

Mailing Address 635 West 47th Street

City Chicago State IL Zip Code 60609

Purpose of Disbursement
Paper Bags for food Giveaway

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12885

Date of Disbursement

12 / 21 / 2007

Amount of Each Disbursement this Period

145.85

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

B.

Full Name (Last, First, Middle Initial)
Freddrenna M. Lyle

Mailing Address 7318 S. Cottage Grove

City Chicago State IL Zip Code 60619

Purpose of Disbursement
Legal Fees

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12844

Date of Disbursement

01 / 13 / 2008

Amount of Each Disbursement this Period

4000.00

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

C.

Full Name (Last, First, Middle Initial)
Majestic Florist

Mailing Address 8145 S. Cottage Grove

City Chicago State IL Zip Code 60619

Purpose of Disbursement
FLORAL ARRANGEMENTS

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.13079

Date of Disbursement

01 / 16 / 2008

Amount of Each Disbursement this Period

82.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

4227.85

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Joseph Mathews, Sr. <hr/> Mailing Address 1529 East 85th Street <hr/> City CHICAGO State IL Zip Code 60619 <hr/> Purpose of Disbursement POLLING/PETITIONS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12957 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 7	Amount of Each Disbursement this Period 210.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Democratic Club <hr/> Mailing Address 30 Ivy Street, S.E. <hr/> City Washington State DC Zip Code 20003-4071 <hr/> Purpose of Disbursement Meals & Meetings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12905 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7	Amount of Each Disbursement this Period 537.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 5420 S. Lake Park Ave. <hr/> City Chicago State IL Zip Code 60615 <hr/> Purpose of Disbursement office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12928 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7	Amount of Each Disbursement this Period 235.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	982.46
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 1370 Torrence Avenue City Calumet City State IL Zip Code 60409 Purpose of Disbursement TONER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13078 Date of Disbursement 11 / 09 / 2007 Amount of Each Disbursement this Period 273.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Office Max Mailing Address 2660 West 95th Street City Chicago State IL Zip Code 60600 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12947 Date of Disbursement 11 / 24 / 2007 Amount of Each Disbursement this Period 54.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Office Max Mailing Address 2660 West 95th Street City Chicago State IL Zip Code 60600 Purpose of Disbursement LABELS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12962 Date of Disbursement 12 / 18 / 2007 Amount of Each Disbursement this Period 68.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	396.40
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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Warren N. Parks

Mailing Address 8630 Reinecke Court

City Manassas Park State VA Zip Code 20111

Purpose of Disbursement
Transportation - Driver

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12921
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

B.

Full Name (Last, First, Middle Initial)
People's Energy

Mailing Address Bill Payment Center

City Chicago State IL Zip Code 60600

Purpose of Disbursement
NATURAL GAS

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.13073
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)
Barbet Phillips

Mailing Address 3812 S. Lake Park

City Chicago State IL Zip Code 60653

Purpose of Disbursement
circulated petitions

Candidate Name

005
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.13057
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Perry Ridley Mailing Address 1045 W. Maxwell City Chicago State IL Zip Code 60608 Purpose of Disbursement petition circulating/polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13047 Date of Disbursement 10 / 27 / 2007	Amount of Each Disbursement this Period 70.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carolyn A. Rush Mailing Address 3534 S. Calumet Ave. City Chicago State IL Zip Code 60653 Purpose of Disbursement Consultant Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12926 Date of Disbursement 10 / 18 / 2007	Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carolyn A. Rush Mailing Address 3534 S. Calumet Ave. City Chicago State IL Zip Code 60653 Purpose of Disbursement Consultant Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12916 Date of Disbursement 11 / 05 / 2007	Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5070.00

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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Carolyn A. Rush

Transaction ID: SB17.12910
Date of Disbursement

Mailing Address 3534 S. Calumet Ave.

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

City Chicago State IL Zip Code 60653

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Consultant Fee

001

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Carolyn A. Rush

Transaction ID: SB17.12893
Date of Disbursement

Mailing Address 3534 S. Calumet Ave.

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

City Chicago State IL Zip Code 60653

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Consultant Fee

001

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Carolyn A. Rush

Transaction ID: SB17.12882
Date of Disbursement

Mailing Address 3534 S. Calumet Ave.

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

City Chicago State IL Zip Code 60653

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Consultant Fee

001

Category/
Type

Candidate Name

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

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Carolyn A. Rush

Transaction ID: SB17.12877
Date of Disbursement

Mailing Address 3534 S. Calumet Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	0	8

City Chicago State IL Zip Code 60653

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Consultant Fee

001
Category/
Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Flynn Rush

Transaction ID: SB17.13069
Date of Disbursement

Mailing Address 3567 S. Rhodes

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

City Chicago State IL Zip Code 60615

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
POLLING/BINDER CHECK

005
Category/
Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Flynn Rush

Transaction ID: SB17.13093
Date of Disbursement

Mailing Address 3567 S. Rhodes

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	7

City Chicago State IL Zip Code 60615

Amount of Each Disbursement this Period

140.00

Purpose of Disbursement
Binder Check/Petition Drive

005
Category/
Type

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2940.00

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) ShoreBank Mailing Address 7054 S. Jeffery Blvd. City Chicago State IL Zip Code 60649 Purpose of Disbursement BANK SERVICE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13065 Date of Disbursement 10 / 31 / 2007 Amount of Each Disbursement this Period 48.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) ShoreBank Mailing Address 7054 S. Jeffery Blvd. City Chicago State IL Zip Code 60649 Purpose of Disbursement BANK SERVICE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13063 Date of Disbursement 11 / 30 / 2007 Amount of Each Disbursement this Period 23.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) ShoreBank Mailing Address 7054 S. Jeffery Blvd. City Chicago State IL Zip Code 60649 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13062 Date of Disbursement 12 / 31 / 2007 Amount of Each Disbursement this Period 36.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

108.15

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)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) Simply Self Storage Mailing Address 2601 King Drive City Chicago State IL Zip Code 60616 Purpose of Disbursement Storage Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12922 Date of Disbursement <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>1</td><td>0</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1700.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	3	/	2	0	0	7	1700.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	3	/	2	0	0	7														
1700.00																							
B.	Full Name (Last, First, Middle Initial) Star Catering Mailing Address 2761 Washington Blvd City Arlington State VA Zip Code 22201 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.12881 Date of Disbursement <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>1</td><td>2</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1344.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	9	/	2	0	0	7	1344.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	1	9	/	2	0	0	7														
1344.00																							
C.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address Various City Chicago State IL Zip Code 60600 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13084 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>123.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	9	/	2	0	0	7	123.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	9	/	2	0	0	7														
123.00																							

SUBTOTAL of Disbursements This Page (optional) ▶

3167.00

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)

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: SB17.13080 Date of Disbursement 01 / 16 / 2008
	Mailing Address Various	Amount of Each Disbursement this Period 52.00
	City Chicago State IL Zip Code 60600	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement POST OFFICE BA Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: SB17.13082 Date of Disbursement 01 / 16 / 2008
	Mailing Address Various	Amount of Each Disbursement this Period 52.00
	City Chicago State IL Zip Code 60600	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PO BOX RENTAL Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Angelia Roberts Watkins	Transaction ID: SB17.12889 Date of Disbursement 12 / 17 / 2007
	Mailing Address 1241 E. 98th Street	Amount of Each Disbursement this Period 1000.00
	City Chicago State IL Zip Code 60628	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Room Deposit and Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1104.00
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 53 / 61

<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)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Tracey Williams

Mailing Address 19405 Cypress Drive

City State Zip Code
Country Club Hills IL 60478

Purpose of Disbursement
Entertainment - DJ

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.12887

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

450.00

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

SUBTOTAL of Disbursements This Page (optional)

450.00

TOTAL This Period (last page this line number only)

48367.21

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Beloved Community Christian Church

Mailing Address 6430 S. Harvard

City Chicago State IL Zip Code 60600

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.12925

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

18000.00

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

B.

Full Name (Last, First, Middle Initial)
Black Ensemble Theatre

Mailing Address 4520 N. Beacon

City Chicago State IL Zip Code 60600

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.12932

Date of Disbursement

10 / 06 / 2007

Amount of Each Disbursement this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Committee to Elect John O. Steele Appellate Court Judge

Mailing Address 7835 S. Rhodes Ave

City Chicago State IL Zip Code 60619

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.12870

Date of Disbursement

01 / 16 / 2008

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional)

19500.00

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 / 61

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

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A.

Full Name (Last, First, Middle Initial)
Rev. Lucius Hall

Transaction ID: SB21.12919
Date of Disbursement

Mailing Address 2140 West 79th Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	7

City Chicago State IL Zip Code 60620

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Donation - Anniversary

012

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Logos Baptist Assembly

Transaction ID: SB21.12913
Date of Disbursement

Mailing Address 10833 S. Halsted Street

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

City Chicago State IL Zip Code 60600

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Donation

012

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

21500.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 57 / 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

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

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

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

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

Outstanding Balance Beginning This Period		Transaction ID: SD10.8787	
<input type="text" value="9.96"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="9.96"/>	

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

Outstanding Balance Beginning This Period		Transaction ID: SD10.11451	
<input type="text" value="6890.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="6890.00"/>	

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

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

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="7749.96"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

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

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

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

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

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>		Transaction ID: SD10.451	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2094.54"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 60 / 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

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

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

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

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

Outstanding Balance Beginning This Period 300.00	Transaction ID: SD10.453	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 300.00

1) SUBTOTALS This Period This Page (optional).....	3103.92
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

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

Outstanding Balance Beginning This Period 200.00		Transaction ID: SD10.454	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00	

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

Outstanding Balance Beginning This Period 250.00		Transaction ID: SD10.455	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	3450.00
2) TOTALS This Period (last page this line number only).....	▶	23489.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	23489.43