

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

ADDRESS (number and street) 228 S WASHINGTON ST STE 115  
 Check if different than previously reported. (ACC)  
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00428144  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 07 2006 in the State of \_\_\_\_\_

5. Covering Period 10 19 2006 through 11 27 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Keith A. Davis  
Signature of Treasurer Electronically Filed by Keith A. Davis Date 12 07 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		0.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	155727.17									
(c) Total Receipts (from Line 19) .....	100900.00	700822.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	256627.17	700822.00								
7. Total Disbursements (from Line 31) .....	256566.15	700760.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61.02	61.02								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	93800.00	655950.00
(i) Itemized (use Schedule A) .....	0.00	772.00
(ii) Unitemized .....	93800.00	656722.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7100.00	44100.00
(c) Other Political Committees (such as PACs) .....	100900.00	700822.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	100900.00	700822.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	100900.00	700822.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10705.70	107997.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	10705.70	107997.05
22. Transfers to Affiliated/Other Party Committees.....	224333.17	571236.65
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	21527.28	21527.28
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	21527.28	21527.28
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	256566.15	700760.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	256566.15	700760.98

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	100900.00	700822.00
34. Total Contribution Refunds (from Line 28(d)) .....	21527.28	21527.28
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	79372.72	679294.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10705.70	107997.05
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10705.70	107997.05

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Michael Abernathy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 1530 Foothill Court		<b>Transaction ID: SA11A1.4543</b>	
City Wheaton	State IL	Amount of Each Receipt this Period 5000.00	
Zip Code 60187		FEC ID number of contributing federal political committee. C	
Name of Employer Bell Boyd & Lloyd	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Pamela Abernathy</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 1530 Foothill Court		<b>Transaction ID: SA11A1.4544</b>	
City Wheaton	State IL	Amount of Each Receipt this Period 5000.00	
Zip Code 60187		FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Steven Y. Amiel</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6	
Mailing Address 912 Stonegate Drive		<b>Transaction ID: SA11A1.4542</b>	
City Highland Park	State IL	Amount of Each Receipt this Period 1000.00	
Zip Code 60035-5147		FEC ID number of contributing federal political committee. C	
Name of Employer Self-employed	Occupation Investor/Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Richard P. Distasio</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 715 North Prospect		<b>Transaction ID: SA11A1.4546</b>	
City State Zip Code Park Ridge IL 60068	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Augusta Holdings, LLC	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas G. Fitzgerald</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 1629 Colonial Parkway		<b>Transaction ID: SA11A1.4563</b>	
City State Zip Code Inverness IL 60067	Amount of Each Receipt this Period 4200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Banknote Capital Corporation	Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00		

Full Name (Last, First, Middle Initial) <b>C. Susan M. Graunke</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 6	
Mailing Address 461 Oak Knoll		<b>Transaction ID: SA11A1.4566</b>	
City State Zip Code Barrington Hills IL 60010	Amount of Each Receipt this Period 6600.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A.</b> Terrence M. Graunke		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 676 Michigan Avenue Suite 3900		<b>Transaction ID:</b> SA11A1.4567
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 6600.00
Name of Employer Lake Capital	Occupation Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John A. Janicik		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 42 Waverly Avenue		<b>Transaction ID:</b> SA11A1.4528
City Clarendon Hills	State IL	Zip Code 60514
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Mayer Brown Rowe & Maw	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Deborah Jannotta		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1175 Whitebridge Hill		<b>Transaction ID:</b> SA11A1.4555
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 14200.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	21800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A.</b> Deborah M. Olinger		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 6
Mailing Address 1510 N. Dearborn Parkway #201		<b>Transaction ID:</b> SA11A1.4560
City Chivago	State IL	Zip Code 60610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3600.00
Name of Employer Lake Capital	Occupation Administrative Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Anne N. Reyes		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 9500 West Bryn Mawr Avenue Suite 700		<b>Transaction ID:</b> SA11A1.4531
City Rosemont	State IL	Zip Code 60018
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 4200.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> David K. Reyes		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 1433 Via Anita		<b>Transaction ID:</b> SA11A1.4535
City Pacific Palisades	State CA	Zip Code 90272
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 8300.00
Name of Employer Harbor Distributing/Reyes Hldn	Occupation Co-Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	16100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. J. Christopher Reyes</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 9500 West Bryn Mawr Avenue Suite 700		<b>Transaction ID: SA11A1.4532</b>
City Rosemont	State IL Zip Code 60018	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 4200.00
Name of Employer Reyes Holdings, LLC	Occupation Co-Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) <b>B. M. Jude Reyes</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 6
Mailing Address 9500 West Bryn Mawr Avenue Suite 700		<b>Transaction ID: SA11A1.4536</b>
City Rosemont	State IL Zip Code 60018	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 8300.00
Name of Employer Reyes Holdings, LLC	Occupation Co-Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8300.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph J. Ritchie</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 2100 Enterprise Avenue		<b>Transaction ID: SA11A1.4525</b>
City Geneva	State IL Zip Code 60134	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 12400.00
Name of Employer Fox River Financial	Occupation Investment advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	24900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

**A.** Full Name (Last, First, Middle Initial)  
Sharon Ritchie

Mailing Address 2100 Enterprise Avenue

City State Zip Code  
Geneva IL 60134

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 6

**Transaction ID:** SA11A1.4526

Amount of Each Receipt this Period  
4200.00

**B.** Full Name (Last, First, Middle Initial)  
Paul G. Yovovich

Mailing Address 200 Warwick Road

City State Zip Code  
Kenilworth IL 60043

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

Name of Employer Occupation  
Lake Capital Investment Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

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

**Transaction ID:** SA11A1.4561

Amount of Each Receipt this Period  
4000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>93800.00</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 22
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

**A.** Full Name (Last, First, Middle Initial)  
UNDERGROUND CONTRACTORS ASSOCIATION PAC

Mailing Address 500 Park Blvd  
Suite 154C

City Itasca State IL Zip Code 60143

FEC ID number of contributing federal political committee. **C** C00414599

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7100.00

Date of Receipt  

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

Transaction ID: SA11C.4538

Amount of Each Receipt this Period  
7100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7100.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Huckaby Davis Lisker</b>		<b>Transaction ID: SB21B.4582</b> Date of Disbursement 11 / 27 / 2006
Mailing Address 228 S. Washington Street Suite 115		Amount of Each Disbursement this Period 3200.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Accounting svcs/phone/delivery/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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Lisa Wagner &amp; Company</b>		<b>Transaction ID: SB21B.4569</b> Date of Disbursement 11 / 22 / 2006
Mailing Address 1465 Stoddard Avenue		Amount of Each Disbursement this Period 3655.70
City Wheaton State IL Zip Code 60187	Purpose of Disbursement Photography exp/delivery/telephone/posta Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. McGahn &amp; Associates, PLLC</b>		<b>Transaction ID: SB21B.4557</b> Date of Disbursement 11 / 07 / 2006
Mailing Address 601 Pennsylvania Avenue NW Suite 900, South Building		Amount of Each Disbursement this Period 1350.00
City Washington State DC Zip Code 20004	Purpose of Disbursement Legal services (for joint committee) Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>8205.70</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial)

**A.** Reflections Photography

Mailing Address 631 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Photography expense-for joint committee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4579

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. DAVID MCSWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB22.4485</b> Date of Disbursement
Mailing Address 8 HUBBELL COURT		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City BARRINGTON HILLS	State IL	Zip Code 60010
Purpose of Disbursement Transfer of net proceeds		Amount of Each Disbursement this Period <input type="text" value="35033.40"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 8	

Full Name (Last, First, Middle Initial) <b>B. DAVID MCSWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB22.4548</b> Date of Disbursement
Mailing Address 8 HUBBELL COURT		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City BARRINGTON HILLS	State IL	Zip Code 60010
Purpose of Disbursement Transfer of net proceeds		Amount of Each Disbursement this Period <input type="text" value="25567.14"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 8	

Full Name (Last, First, Middle Initial) <b>C. DAVID MCSWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB22.4551</b> Date of Disbursement
Mailing Address 8 HUBBELL COURT		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City BARRINGTON HILLS	State IL	Zip Code 60010
Purpose of Disbursement Transfer of net proceeds		Amount of Each Disbursement this Period <input type="text" value="6086.46"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 8	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="66687.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. DAVID MCSWEENEY FOR CONGRESS</b>		<b>Transaction ID: SB22.4570</b> Date of Disbursement 11 / 27 / 2006
Mailing Address 8 HUBBELL COURT		Amount of Each Disbursement this Period 2116.25
City BARRINGTON HILLS State IL Zip Code 60010	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. ILLINOIS REPUBLICAN PARTY</b>		<b>Transaction ID: SB22.4487</b> Date of Disbursement 10 / 23 / 2006
Mailing Address P.O. Box 64897		Amount of Each Disbursement this Period 19280.66
City Chicago State IL Zip Code 60664	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. ILLINOIS REPUBLICAN PARTY</b>		<b>Transaction ID: SB22.4549</b> Date of Disbursement 10 / 26 / 2006
Mailing Address P.O. Box 64897		Amount of Each Disbursement this Period 35128.21
City Chicago State IL Zip Code 60664	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>56525.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. ILLINOIS REPUBLICAN PARTY</b>		<b>Transaction ID: SB22.4553</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 64897		Amount of Each Disbursement this Period 5670.94
City Chicago State IL Zip Code 60664	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. ILLINOIS REPUBLICAN PARTY</b>		<b>Transaction ID: SB22.4572</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 64897		Amount of Each Disbursement this Period 22625.63
City Chicago State IL Zip Code 60664	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. ROSKAM FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB22.4486</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 6
Mailing Address 423 W. Wesley Street		Amount of Each Disbursement this Period 35096.30
City Wheaton State IL Zip Code 60189	Purpose of Disbursement Transfer of net proceeds Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 6	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>63392.87</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. ROSKAM FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB22.4547</b> Date of Disbursement
Mailing Address 423 W. Wesley Street		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Wheaton	State IL	Zip Code 60189
Purpose of Disbursement Transfer of net proceeds	<input type="text" value="22045.65"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 6	

Full Name (Last, First, Middle Initial) <b>B. ROSKAM FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB22.4552</b> Date of Disbursement
Mailing Address 423 W. Wesley Street		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Wheaton	State IL	Zip Code 60189
Purpose of Disbursement Transfer of net proceeds	<input type="text" value="2442.59"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 6	

Full Name (Last, First, Middle Initial) <b>C. ROSKAM FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB22.4571</b> Date of Disbursement
Mailing Address 423 W. Wesley Street		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City Wheaton	State IL	Zip Code 60189
Purpose of Disbursement Transfer of net proceeds	<input type="text" value="13239.94"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 6	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="37728.18"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="224333.17"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Thomas G. Fitzgerald</b>		<b>Transaction ID: SB28A.4577</b> Date of Disbursement 11 / 27 / 2006
Mailing Address 1629 Colonial Parkway		Amount of Each Disbursement this Period 2100.00
City Inverness	State IL Zip Code 60067	
Purpose of Disbursement Contribution refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Terrence M. Graunke</b>		<b>Transaction ID: SB28A.4578</b> Date of Disbursement 11 / 27 / 2006
Mailing Address 676 Michigan Avenue Suite 3900		Amount of Each Disbursement this Period 5400.00
City Chicago	State IL Zip Code 60611	
Purpose of Disbursement Contribution refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Allan J. Hamilton</b>		<b>Transaction ID: SB28A.4573</b> Date of Disbursement 11 / 27 / 2006
Mailing Address 11000 Conley Road		Amount of Each Disbursement this Period 9127.28
City Huntley	State IL Zip Code 60142	
Purpose of Disbursement Contribution refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>16627.28</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Deborah Jannotta</b>		<b>Transaction ID: SB28A.4576</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6
Mailing Address 1175 Whitebridge Hill		Amount of Each Disbursement this Period 2100.00
City Winnetka State IL Zip Code 60093	Purpose of Disbursement Contribution refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Prakash Patel</b>		<b>Transaction ID: SB28A.4550</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 6
Mailing Address 4893 S. Waterview Ct.		Amount of Each Disbursement this Period 2000.00
City Greenfield State WI Zip Code 53220	Purpose of Disbursement Contribution refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Richard S. Pepper</b>		<b>Transaction ID: SB28A.4574</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6
Mailing Address 78 Dundee Lane		Amount of Each Disbursement this Period 400.00
City Barrington State IL Zip Code 60010	Purpose of Disbursement Contribution refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ILLINOIS CONGRESSIONAL VICTORY COMMITTEE 2006

Full Name (Last, First, Middle Initial) <b>A. Roxy Pepper</b>		<b>Transaction ID: SB28A.4575</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 6	
Mailing Address 78 Dundee Lane		Amount of Each Disbursement this Period 400.00	
City Barrington	State IL	Zip Code 60010	Category/ Type
Purpose of Disbursement Contribution refund		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>21527.28</b>

**Image# 26940851914**

Form/Schedule: **SB21B** for joint committee

Transaction ID: **SB21B.4582**

Form/Schedule: **SB21B** for joint committee

Transaction ID: **SB21B.4569**

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