

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
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

ADDRESS (number and street) 20 SOUTH WACKER DRIVE
 Check if different than previously reported. (ACC)
CHICAGO IL 60606

2. **FEC IDENTIFICATION NUMBER** C00076299
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 _____ in the State of _____

5. Covering Period 04 01 2006 through 04 30 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 Mr. Ronald A. Pankau

Signature of Treasurer Electronically Filed by Mr. Ronald A. Pankau Date 05 17 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**

Write or Type Committee Name
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

D	D
3	0

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		243902.83
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	142133.33									
(c) Total Receipts (from Line 19)	50334.50	63565.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	192467.83	307467.83								
7. Total Disbursements (from Line 31)	18000.00	133000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	174467.83	174467.83								
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)	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
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

D	D
3	0

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	47731.56	59171.12
(i) Itemized (use Schedule A)	2602.94	4393.88
(ii) Unitemized	50334.50	63565.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	50334.50	63565.00
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))	50334.50	63565.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50334.50	63565.00

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	133000.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
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))..	18000.00	133000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18000.00	133000.00

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)	50334.50	63565.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50334.50	63565.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 / 16
	<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

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

Mailing Address 4343 N. Clarendon Ave.

City State Zip Code
Chicago ID 60613

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2006

Transaction ID: SA11A1.11376

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Travis Aronson

Mailing Address 230 S. LaSalle St.

City State Zip Code
Chicago IL 60604

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

Name of Employer
Ronin Capital, LLC, Chicago

Occupation
Trader/Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2006

Transaction ID: SA11A1.11379

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Jon M. Callahan

Mailing Address 2010 W. Bradley Pl.

City State Zip Code
Chicago IL 60618

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Commodity Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2006

Transaction ID: SA11A1.11370

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10250.00
TOTAL 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 7 / 16
	<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
Peyton Callahan

Mailing Address 2010 W. Bradley Pl.

City State Zip Code
Chicago IL 60618

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

Name of Employer Same Occupation Actress

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.11371

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Anthony Dina

Mailing Address 4073 Grove

City State Zip Code
Western Springs IL 60558

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

Name of Employer CME, 20 S. Wacker Dr., Chicago Occupation Commodity Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.11383

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Alvin B. Dodek

Mailing Address 2424 Geenwood Ct.

City State Zip Code
Glenview IL 60025

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

Name of Employer 318 W. Adams, Chicago Occupation Commodity Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.11372

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10250.00
TOTAL 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 / 16
	<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
Nancy W. Goble

Mailing Address 332 S. Madison Ave.

City State Zip Code
La Grange IL 60525

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago, IL

Occupation
Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 07 / 2006

Transaction ID: SA11A1.11421

Amount of Each Receipt this Period
185.00

B. Full Name (Last, First, Middle Initial)
Nancy W. Goble

Mailing Address 332 S. Madison Ave.

City State Zip Code
La Grange IL 60525

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago, IL

Occupation
Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.11453

Amount of Each Receipt this Period
185.00

C. Full Name (Last, First, Middle Initial)
Judith Gorz

Mailing Address 3936 S. Home Ave.

City State Zip Code
Stickney IL 60402

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.11397

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	670.00
TOTAL 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 / 16
	<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
Julie Hobert

Mailing Address 2037 W. Bradley Pl.

City State Zip Code
Chicago IL 60618

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

Name of Employer Same Occupation Singer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.11373

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
William W. Hobert

Mailing Address 2037 W. Bradley Pl.

City State Zip Code
Chicago IL 60618

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

Name of Employer CME, 20 S. Wacker Dr., Chicago Occupation Commodity Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.11374

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
David Jones

Mailing Address 920 Burrigde Ct.

City State Zip Code
Libertyville IL 60048

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

Name of Employer CME, 20 S. Wacker Dr., Chicago Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.11386

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	10250.00
TOTAL 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 / 16
	<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
Eileen Beth Keeve

Mailing Address 808 Burhess Hill Rd.

City Naperville State IL Zip Code 60565

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

Name of Employer CME, 20 S. Wacker Dr., Chicago
Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 681.84

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2006

Transaction ID: SA11A1.11424

Amount of Each Receipt this Period
 227.28

B. Full Name (Last, First, Middle Initial)
Eileen Beth Keeve

Mailing Address 808 Burhess Hill Rd.

City Naperville State IL Zip Code 60565

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

Name of Employer CME, 20 S. Wacker Dr., Chicago
Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 909.12

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2006

Transaction ID: SA11A1.11456

Amount of Each Receipt this Period
 227.28

C. Full Name (Last, First, Middle Initial)
James R. Krause

Mailing Address 518 Rosiland Dr.

City Palatine State IL Zip Code 60074

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

Name of Employer CME, 20 S. Wacker Dr., Chicago
Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2006

Transaction ID: SA11A1.11377

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5454.56
TOTAL 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 11 / 16
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
Daniel Laubhan

Mailing Address 881 Harvard Ct.

City State Zip Code
Highland Park IL 60035

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.11461

Amount of Each Receipt this Period
57.00

B. Full Name (Last, First, Middle Initial)
Patricia L. McGill

Mailing Address 576 Forest Preserve Dr.

City State Zip Code
Wood Dale IL 60191

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.11399

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Robert Osanski

Mailing Address 195 N. Harbor Dr.

City State Zip Code
Chicago IL 60601

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
Commodity Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.11402

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	857.00
TOTAL 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 12 / 16
	(check only one)	
<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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

A. Full Name (Last, First, Middle Initial)
James E. Parisi

Mailing Address 1090 Winding Glen Ct.

City State Zip Code
Carol Stream IL 60188

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

Name of Employer
CME, 20 S. Wacker Dr., Chicago

Occupation
CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 25 / 2006

Transaction ID: SA11A1.11378

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Linda Schwartz

Mailing Address 2424 Greenwood Ct.

City State Zip Code
Glenview IL 60025

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

Name of Employer
Same

Occupation
Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2006

Transaction ID: SA11A1.11375

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	47731.56

**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)

PAGE 13 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Full Name (Last, First, Middle Initial) A. Max Baucus		Transaction ID: SB23.11359 Date of Disbursement
Mailing Address Friends of Max Baucus P.O. Box 586		<input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Helena	State MT	Zip Code 59624
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT	District:	

Full Name (Last, First, Middle Initial) B. Tom Feeney		Transaction ID: SB23.11355 Date of Disbursement
Mailing Address Tom Feeney for Congress 1420 Alafaya Trail		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City Oviedo	State FL	Zip Code 32765
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 24	

Full Name (Last, First, Middle Initial) C. Robin Hayes		Transaction ID: SB23.11365 Date of Disbursement
Mailing Address Hayes for Congress 285 Church St.		<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>
City Concord	State NC	Zip Code 28025
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 8	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL 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)

PAGE 14 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Full Name (Last, First, Middle Initial) A. Tim Holden		Transaction ID: SB23.11357 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address Friends of Congressman Tim Holden P.O. Box 37		Amount of Each Disbursement this Period 500.00
City Saint Clair State PA Zip Code 17970		
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 17		

Full Name (Last, First, Middle Initial) B. Frank Lautenberg		Transaction ID: SB23.11360 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address Frank Lautenberg for Senate 226 Morgan Ave.		Amount of Each Disbursement this Period 2000.00
City Collingswood State NJ Zip Code 08108		
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District:		

Full Name (Last, First, Middle Initial) C. Jim Marshall		Transaction ID: SB23.11353 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address Friends of Jim Marshall P.O. Box 125		Amount of Each Disbursement this Period 2000.00
City Macon State GA Zip Code 31201		
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 3		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Full Name (Last, First, Middle Initial) A. Mitch McConnell		Transaction ID: SB23.11367 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address McConnell Senate Committee 1930 Bishop Ln.		Amount of Each Disbursement this Period 5000.00
City Louisville	State KY	
Zip Code 40218		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: KY District:	

Full Name (Last, First, Middle Initial) B. Gregory Meeks		Transaction ID: SB23.11362 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address Meeks for Congress P.O. Box 900297		Amount of Each Disbursement this Period 1000.00
City Far Rockaway	State NY	
Zip Code 11690		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 6	

Full Name (Last, First, Middle Initial) C. Ben Nelson		Transaction ID: SB23.11354 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6
Mailing Address Nelson for U.S. Senate 1915 N. 121st St.		Amount of Each Disbursement this Period 1000.00
City Omaha	State NE	
Zip Code 68154		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District:	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

Full Name (Last, First, Middle Initial)

A. Senate Victory Fund

Mailing Address P.O. Box 7274

City State Zip Code
Tupelo MS 38802

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Committee

Transaction ID: SB23.11369

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)