

**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

Schock for Congress

ADDRESS (number and street)  
▼

PO Box 10555

☐Check if different  
than previously  
reported. (ACC)

Peoria

IL

61612

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00437756

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

IL

18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☒

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2008

through

06

30

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

Rachel Honegger

Signature of Treasurer

Electronically Filed by Rachel Honegger

Date

10

29

2009

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

Office  
Use  
Only**FEC FORM 3**

(Revised 02/2003)

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Schock for Congress

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 8

To:

M M  
0 6D D  
3 0Y 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)).....	408756.28	1505472.02
(b) Total Contribution Refunds (from Line 20(d)).....	200.00	1700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	408556.28	1503772.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	273883.57	1204927.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	167.89	27229.57
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	273715.68	1177698.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	324481.68	
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).....	9731.68	

**For further information contact:**

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name  
Schock for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	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	238087.10	944279.00
(i) Itemized (use Schedule A).....	38862.10	135743.94
(ii) Unitemized.....	276949.20	1080022.94
(iii) TOTAL of contributions from individuals..... ▶	5360.92	5752.92
(b) Political Party Committees.....	126446.16	369696.16
(c) Other Political Committees (such as PACS).....	0.00	50000.00
(d) The Candidate.....	408756.28	1505472.02
(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.).....	167.89	27229.57
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	63.65	708.04
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	408987.82	1533409.63

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	273883.57	1204927.95
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.....	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	1700.00
21. OTHER DISBURSEMENTS.....	0.00	2300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	274083.57	1208927.95

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	189577.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	408987.82
25. SUBTOTAL (add Line 23 and Line 24).....	598565.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	274083.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	324481.68

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

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

FOR LINE NUMBER: PAGE 5 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Elna E. Grimm

Mailing Address 115 Parkside Dr

City

Goodfield

State

IL

Zip Code

61742-9614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A63B2373CB8A245B4B4E

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. John Wilkens

Mailing Address 5902 N. Elm Ln

City

Peoria

State

IL

Zip Code

61614-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A78B46C749FCD4DEAA6B

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Elizabeth Griebel

Mailing Address 505 Collingwood Cir

City

Peoria

State

IL

Zip Code

61614-2005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A81C04F50F8FA43D2BA3

Amount of Each Receipt this Period

50.00

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

400.00

**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 6 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Stephanie L. Heinold

Mailing Address 340 S. Minnesota Ave

City

Morton

State

IL

Zip Code

61550-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A27BD6028416A442EAEA

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Altorfer

Mailing Address 4300 N. Padua Ln

City

Peoria

State

IL

Zip Code

61615-9627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Facilities, Inc.

Occupation

Vice President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A202E1DDBB95F46A2982

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Mary M. Satzler

Mailing Address 16615 W. Streitmatter Rd

City

Princeville

State

IL

Zip Code

61559-9428

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A6F00E359B861401E996

Amount of Each Receipt this Period

100.00

**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 7 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Barr

Mailing Address 9104 Picture Ridge Rd

City

Peoria

State

IL

Zip Code

61615-1745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
River City Const.Occupation  
Contractor

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	0	8

Transaction ID: A1D1DEC3897AF47DE8A8

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Len Kuchan

Mailing Address 107 W. Northgate Rd

City

Peoria

State

IL

Zip Code

61614-2142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	0	8

Transaction ID: AEC8C5AE7923145AC921

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Barry W. Seidman

Mailing Address 1231 W. Vine

City

Springfield

State

IL

Zip Code

62704-2830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central IL Home Furnishin-  
s. LLCOccupation  
Managing Partner

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	8

Transaction ID: A77C06BAA6DEE47B0A78

Amount of Each Receipt this Period

250.00

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

1350.00

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 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Tammy F. Cameron

Mailing Address 5829 Govenor's Hill Dr

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Van Scoyoc Associates

Occupation

Vice President

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	8

Transaction ID: A6BB3926E29B24BA8A4E

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. David W. Altorfer

Mailing Address 340 Ravinswood Rd

City

Peoria

State

IL

Zip Code

61615-1363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Facilities, Inc.

Occupation

V.P.

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	8

Transaction ID: A6C7A1183B9B8431E8AA

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Cletus R. Swanson

Mailing Address 3915 N. Kathy Ln

City

Peoria

State

IL

Zip Code

61615-4021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	8

Transaction ID: ACE988567B5B84825A1B

Amount of Each Receipt this Period

100.00

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

600.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lynn Newton

Mailing Address Rt 2 Box 197

City

Wyoming

State

IL

Zip Code

61491-9571

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 0 8

Transaction ID: AA621B5F7C82B456D9CA

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Helen C. Downey

Mailing Address 209 Leland Lake Dr

City

Jacksonville

State

IL

Zip Code

62650-2695

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colton Downey Et Al

Occupation

Agent

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 0 8

Transaction ID: A8951938FCEF34264994

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carson Klitz

Mailing Address 18 Robinwood Dr

City

Rushville

State

IL

Zip Code

62681-1206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chris Klitz

Occupation

Farm Hand

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 0 8

Transaction ID: A32C8BD7C7F2A4A3AA65

Amount of Each Receipt this Period

250.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark G. Field

Mailing Address P O Box 196

City

Liberty

State

IL

Zip Code

62347-0196

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Bank of Liberty

Occupation  
Banker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A68F58D7F7D39431F848

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. Jose Hernandez-Graulau

Mailing Address 208 East Hanover Place

City

Peoria

State

IL

Zip Code

61614-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Midwest Urological Group

Occupation  
Urologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A380E06C08A224743B0F

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Betty Schumacher

Mailing Address 376 E. Cruger, Apt 4

City

Washington

State

IL

Zip Code

61571-9719

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: ABB032F2EB8AF40819BF

Amount of Each Receipt this Period

100.00

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

600.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Harrison C. Putman, III

Mailing Address 412 W. Ravinswood Rd

City

Peoria

State

IL

Zip Code

61615-1365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Surgeon

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A3035C55AAF4D4ECC933

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. George C. Craft

Mailing Address 8382 N. Craft Rd

City

Vermont

State

IL

Zip Code

61484-9680

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A9A50EBDEFB2E42E3844

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Raymond Bertino

Mailing Address 427 W. Crestwood

City

Peoria

State

IL

Zip Code

61614-7255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central IL RadiologyOccupation  
Radiologist

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  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A8CA82DD78C31491697B

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Kaiann Holt

Mailing Address 14420 Mendenhall Rd

City

Princeville

State

IL

Zip Code

61559-9333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: AEF88F556BA2147B2BC8

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Elizabeth Cooper

Mailing Address 444 E. High Pt Rd

City

Peoria

State

IL

Zip Code

61614-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Self

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A62CDA413912D4589964

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Bill Wuthrich

Mailing Address 524 East Prospect Ln

City

Peoria

State

IL

Zip Code

61614-4320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KBL

Occupation

Sales

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A3F336CC65C7B4378906

Amount of Each Receipt this Period

250.00

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

600.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven J. Leman

Mailing Address 703 N. 3rd St

City

Roanoke

State

IL

Zip Code

61561-7794

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Praire Farms Dairy

Occupation

Production Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	0	/	2	0	0	8

Transaction ID: AD977401D7EA642D2AA5

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ira H. Carmen

Mailing Address 1212 W. Charles St

City

Champaign

State

IL

Zip Code

61821-4522

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
University of Illinois

Occupation

Professor of Political Science

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	0	/	2	0	0	8

Transaction ID: AED9E928D5710473EAF8

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Cicciarelli

Mailing Address 11333 N. Antler Place

City

Peoria

State

IL

Zip Code

61615-1007

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Pipco

Occupation

Executive Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	0	/	2	0	0	8

Transaction ID: A196B9B42AF1747F1971

Amount of Each Receipt this Period

250.00

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

600.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jay Vonachen

Mailing Address 2302 E Lake Street

City

Peoria

State

IL

Zip Code

61614-6640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VSI

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 8

Transaction ID: ACCC48FA42B7A4C49BA6

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. J. D. Arnold

Mailing Address 25 Whispering Pines Ln

City

Congerville

State

IL

Zip Code

61729-7507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eureka College

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 8

Transaction ID: A3AFBB3719DF14A69BB0

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Kent Noble

Mailing Address 126 E. Southgate Rd

City

Peoria

State

IL

Zip Code

61614-3029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johnson, Bunce & Noble,  
P.C.

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 8

Transaction ID: AF5D171DC880F4BEFAF5

Amount of Each Receipt this Period

250.00

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

750.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Joan Krupa

Mailing Address 4978 N. Grandview Dr

City

Peoria Heights

State

IL

Zip Code

61616-5373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	0	8

Transaction ID: A0EA8833742844CB4AAF

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Joseph G. Mintjal

Mailing Address 4721 White Deer Ct

City

Springfield

State

IL

Zip Code

62711-7870

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	0	8

Transaction ID: A3C58F0DAFFF34AF09EE

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

John Crawford

Mailing Address 7417 Edgewild Dr

City

Peoria

State

IL

Zip Code

61614-2115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	0	8

Transaction ID: A516A47EBB4D2400C873

Amount of Each Receipt this Period

250.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Barb Plattner

Mailing Address 622 W. Hickory Grove Ct

City  
Dunlap

State  
IL

Zip Code  
61525-9453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plattner Orthopedic

Occupation  
Certified Orthotist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A0BDC7F336057400C8FA

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Lynn Banta

Mailing Address 2311 E. Tanglewood Ln

City  
Peoria

State  
IL

Zip Code  
61614-6641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert W Baird Co

Occupation  
Senior VP

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A70B5C33B68DA43C7A78

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Terry Nelson

Mailing Address 8 W. Sycamore St

City  
Chillicothe

State  
IL

Zip Code  
61523-2132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allied Welding

Occupation  
Company President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A65CA1A0F749C4F62B39

Amount of Each Receipt this Period

250.00

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

600.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Sheila J. Shanklin

Mailing Address 5207 W. Briarstone Dr

City

Peoria

State

IL

Zip Code

61615-8623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: AA780C409492E49048AE

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Todd Burrus

Mailing Address 6930 Clark Rd

City

Arenzville

State

IL

Zip Code

62611-3075

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A16905535611A47648A4

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John D. Baer

Mailing Address 14739 Toepfer St

City

Tremont

State

IL

Zip Code

61568-8979

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tremont Medical

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: AEC79EC3F68A840E4BD3

Amount of Each Receipt this Period

50.00

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

800.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Herbert Weinstein

Mailing Address 412 Collingwood Circle

City

Peoria

State

IL

Zip Code

61614-2062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A068D978827434F00890

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph Lahood

Mailing Address 24 Lahood Ln

City

Washington

State

IL

Zip Code

61571-1078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: ABB6608B4231E4FAF9E4

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Agnes E. Levi

Mailing Address 1905 Oak Creek Rd

City

Springfield

State

IL

Zip Code

62704-6202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

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  
0 4 / 1 1 / 2 0 0 8

Transaction ID: A1AE741A283A3493FA84

Amount of Each Receipt this Period

1000.00

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

1650.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Carlo Anthony Von Schroeter

Mailing Address 55 Ledgeways Rd

City

Wellesley Hills

State

MA

Zip Code

02481-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Westview Capital Partners

Occupation

Managing Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: AB1B94764A4484832B27

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Goulding

Mailing Address 2783 Evans Rd

City

Wenona

State

IL

Zip Code

61377-9422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oak State Products

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: AC6750C011AB547D4A74

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Terry Tosi

Mailing Address 4600 N. Knoxville Ave

City

Peoria

State

IL

Zip Code

61614-6104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 8

Transaction ID: AA39EAD658F1A4DE1AEF

Amount of Each Receipt this Period

250.00

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

1250.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Harry C. Stone

Mailing Address 8913 N. Galena Rd

City

Peoria

State

IL

Zip Code

61615-9553

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central II DermatologyOccupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	8

Transaction ID: AE9819471526A427B824

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Martin L. Davis

Mailing Address 3605 Wittington Court

City

Springfield

State

IL

Zip Code

62704-6708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M.Davis Management In.Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	8

Transaction ID: A551A9DB2DEFF4816994

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Linda D. Chasteen

Mailing Address 1613 W. Austin Dr

City

Peoria

State

IL

Zip Code

61614-4079

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Self

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: A0A8A376F5258494183D

Amount of Each Receipt this Period

250.00

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Nancy S. Crew

Mailing Address 900 W. Bridgetowne Ct

City  
Dunlap

State  
IL

Zip Code  
61525-9202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dunlap School Dist.

Occupation  
Substitute Teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: A59D5DB6C48A74B5DA42

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Kate Smart

Mailing Address 4600 Mt Carmel Way

City  
Peoria

State  
IL

Zip Code  
61615-9809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: AEB1ABC0A396A48A7B6A

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

David Gorenz

Mailing Address 3820 N. Bigelow St

City  
Peoria

State  
IL

Zip Code  
61614-7321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OSF (kristy)

Occupation  
Assistant Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: A0753999E87024A3D854

Amount of Each Receipt this Period

250.00

**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: PAGE 22 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Peg Rinkenberger

Mailing Address Box 325

City

Goodfield

State

IL

Zip Code

61742-0325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: AC86D16C6DEA142B5B39

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William S. Waibel

Mailing Address 5821 W. Saddlebrook

City

Edwards

State

IL

Zip Code

61528-9730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: A8B750902D51F4CB5A12

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Adeline R. Wentz

Mailing Address 6401 N. Jamestown Rd

City

Peoria

State

IL

Zip Code

61615-2605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: AA921C158049D49439C6

Amount of Each Receipt this Period

250.00

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

1000.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Winston Stoller

Mailing Address 1134 North Blackberry Ln

City

East Peoria

State

IL

Zip Code

61611-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Widmer Interiors

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: AF0B782A71D744B30B9C

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Eva Rodems

Mailing Address 2187 Southbrooke

City

Jacksonville

State

IL

Zip Code

62650-9201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jacksonville Machine

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A8C730A1761EE4AD3829

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. W. Michael Bryant

Mailing Address 6610 N. Parklawn Ct

City

Peoria

State

IL

Zip Code

61615-6626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Methodist Medical Center

Occupation  
Health Care Executive

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  
0 4 / 1 7 / 2 0 0 8

Transaction ID: AC35B170123464187B0F

Amount of Each Receipt this Period

1000.00

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

1400.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark Stephensen

Mailing Address #305 East St

City

Franklin

State

IL

Zip Code

62638-5195

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PACTIV

Occupation

Factory Machine Operator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A95C275B3DF8F40F4BC9

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Norma C. Ellington

Mailing Address 1227 W. Barker Ave

City

Peoria

State

IL

Zip Code

61606-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A5614295748A64C69B6A

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Manuel Doria

Mailing Address 4428 W. Deermeadow Dr

City

Peoria

State

IL

Zip Code

61615-8922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central IL Pathology

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: ADD5703B8DA4849F8889

Amount of Each Receipt this Period

250.00

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

770.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Margaret Trent

Mailing Address 4035 N. Brookmont

City

Peoria

State

IL

Zip Code

61614-7367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A4D354F7783794DCBAB3

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Rhoda Meister

Mailing Address 4723 Hanna City-Glasford Rd

City

Hanna City

State

IL

Zip Code

61536-9545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A597EFD6C8F0248FFA01

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Bob Dewey

Mailing Address 9701 Cherry Bark Ct

City

Peoria

State

IL

Zip Code

61615-1375

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heyl, Royster, Voelker &  
Allen

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A0897761CBC8445C084E

Amount of Each Receipt this Period

250.00

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

600.00

**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 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Merle G. Rocke

Mailing Address 410 Oak Valley Dr

City

Goodfield

State

IL

Zip Code

61742-9507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CGN & Associates, Inc.

Occupation

Chief Operations Officer

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	8

Transaction ID: AFF6EA814A0B84D2D879

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. John Ruff

Mailing Address 6801 N. Ruff Ln

City

Peoria

State

IL

Zip Code

61614-2843

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peoria Podiatry

Occupation

Physician

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	8

Transaction ID: A15CA566729D8458489D

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jim P. Ghiglieri, Jr.

Mailing Address 207 N. Via Ghiglieri

City

Toluca

State

IL

Zip Code

61369-9778

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpha Financial Group

Occupation

President

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

932.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	8

Transaction ID: A3BA0C5F7A1904FB9AFD

Amount of Each Receipt this Period

250.00

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

1400.00

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 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Stephen Bash

Mailing Address 6161 N. Trails End

City

Peoria

State

IL

Zip Code

61614-3524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pediatric Cardiology Asso-  
ciationOccupation  
Physician

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	8

Transaction ID: A1672A9DD334F477FA42

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Anne M. Mays

Mailing Address 333 W. Fairway Dr

City

Quincy

State

IL

Zip Code

62305-8741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RealtorOccupation  
Coldwell Banker Mays Real Estate

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	8

Transaction ID: ADEA950D81768446EAD9

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Eleanor Pflederer

Mailing Address 66 Forest View Rd

City

Morton

State

IL

Zip Code

61550-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	8

Transaction ID: A6809714B34AF4EB58EF

Amount of Each Receipt this Period

500.00

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

850.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Lynn Roeschley

Mailing Address 145 E Queenwood

City

Morton

State

IL

Zip Code

61550-2956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: AF7D66D5F914D4CE7ABA

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Frederick Joos

Mailing Address 17 White Oak Ct

City

Washington

State

IL

Zip Code

61571-9438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Joos Realty

Occupation

Realtor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A90EAC03066DA4721BB6

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Clay Elward

Mailing Address 108 Timberland Dr

City

Morton

State

IL

Zip Code

61550-1149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar

Occupation

Health Benefits Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: A7CCD2B9B8054419EAA6

Amount of Each Receipt this Period

250.00

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

1000.00

**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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Charles Fangman

Mailing Address 10841 N. Havenhurst Ln

City

Peoria

State

IL

Zip Code

61615-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A9025B2BEF35843DA917

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Rosalee J Slepian

Mailing Address 313 W. Northgate Rd

City

Peoria

State

IL

Zip Code

61614-2146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
One Source RealtyOccupation  
Realtor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A71352CB9D7914CEE21

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Elizabeth S. Leman

Mailing Address 206 N. Garfield St

City

Roanoke

State

IL

Zip Code

61561-7795

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Scott Leman AutosOccupation  
Car Sales

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A9B2F0ADA4DE14512BE1

Amount of Each Receipt this Period

100.00

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

600.00

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 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Sara Kaufman

Mailing Address 208 Gloria Dr

City

Eureka

State

IL

Zip Code

61530-1520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eureka Unit. 140

Occupation

Teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A867D371F8BF041B489D

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Joseph P. Kelly

Mailing Address 406 W. Stratford Dr

City

Peoria

State

IL

Zip Code

61614-7248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A65780CC57CCC4A8C812

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Eric D. Webb

Mailing Address 10500 Coral Belle Ct

City

Peoria

State

IL

Zip Code

61615-8894

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marquette Group

Occupation

Pres/EVP

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A7C927C178F77419A906

Amount of Each Receipt this Period

400.00

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

800.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Mary T. King

Mailing Address 2918 W. Winterberry Ln

City

Peoria

State

IL

Zip Code

61604-1831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A88E69F10FA4449A1A17

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lee Graves

Mailing Address 211 W. Northgate

City

Peoria

State

IL

Zip Code

61614-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELM Enterprise

Occupation

Attorney

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: A3A3952C13D8440F6B5A

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ross Houston

Mailing Address 605 W. North St  
P.o. Box 110

City

Arenzville

State

IL

Zip Code

62611-3542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Transaction ID: AA8A0FAFC35D34A07AF8

Amount of Each Receipt this Period

250.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Karen Baker

Mailing Address 207 Highview Dr

City

Eureka

State

IL

Zip Code

61530-1618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 8

Transaction ID: A58007B54D1CB43A897D

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Cory A. McCoy

Mailing Address 1216 Audubon Dr

City

Pekin

State

IL

Zip Code

61554-6169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 8

Transaction ID: AD9393F3344454266996

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John A Lorenzini

Mailing Address 6263 Bunker Hiill Road

City

New Berlin

State

IL

Zip Code

62670-6659

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BJ Grand Salon & Spa

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A2080911A23EA435CB33

Amount of Each Receipt this Period

1000.00

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

1200.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph O'Neill

Mailing Address 933 W. Giles Lane

City

Peoria

State

IL

Zip Code

61614-2808

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
G & D Integrated

Occupation

Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A865E455C293A4DFB8EC

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Dale Burklund

Mailing Address 4601 N. Grand View Drive

City

Peoria Heights

State

IL

Zip Code

61616-5417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burklund Distribution Inc

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: ADFEBB70F64EA492BB59

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Mary E. Muir

Mailing Address 5155 N. Prospect Rd.

City

Peoria Heights

State

IL

Zip Code

61616-5347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: AB4214D8EC49E4821B1E

Amount of Each Receipt this Period

2300.00

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

4850.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

A.

Full Name (Last, First, Middle Initial)

Dr. Eric T. Elwood

Mailing Address 316 E. High Point Rd.

City

Peoria

State

IL

Zip Code

61614-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peoria Surgical GroupOccupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: AE5C6EA8CD9244F7080B

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Peter Donis

Mailing Address 7610 N. Edgewild Dr

City

Peoria

State

IL

Zip Code

61614-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A285349B160F84304B01

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Norma C. Ellington

Mailing Address 1227 W. Barker Ave

City

Peoria

State

IL

Zip Code

61606-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: AC88034B620064011924

Amount of Each Receipt this Period

250.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Andrew Muir

Mailing Address 5155 N. Prospect Rd.

City

Peoria Heights

State

IL

Zip Code

61616-5347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Muir Graphics

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: AC06117331AA34576BDD

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Janet C. Lees

Mailing Address 506 Cody Ct.

City

Peoria

State

IL

Zip Code

61614-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: AEA20DC1009B4441A948

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William Schnirring

Mailing Address 28 Turnberry Place  
PO Box 4106

City

Springfield

State

IL

Zip Code

62704-3173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Springfield Electric Supply

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: ADF905927204C48D7BC3

Amount of Each Receipt this Period

250.00

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

2800.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Alma Toedter

Mailing Address 507 S. Sheridan St

City

Granville

State

IL

Zip Code

61326-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A91489D3361224B93A22

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Lisa A. Clemson

Mailing Address 917 W. Bennett Ct

City

Dunlap

State

IL

Zip Code

61525-9357

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heartcare Midwest

Occupation  
Cardiologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A96BB3D4577A441FFAB6

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. D Randall Ruskey

Mailing Address 1280 N Forrest Dr

City

Germantown Hills

State

IL

Zip Code

61548-9438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tri County Radiology

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A38DCA0F7CA7C4075840

Amount of Each Receipt this Period

1000.00

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

1500.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jon D. Ware

Mailing Address 1553 Mound Ave

City

Jacksonville

State

IL

Zip Code

62650-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

Transaction ID: A387B36073F2F45BA84F

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Willa Sue Yordy

Mailing Address 1855 Copperfield Dr.

City

Morton

State

IL

Zip Code

61550-3170

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Yordy FarmsOccupation  
Farmer

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

Transaction ID: AA01DC86F70934535900

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jon D. Ware

Mailing Address 1553 Mound Ave

City

Jacksonville

State

IL

Zip Code

62650-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

Transaction ID: AB69580287F584FA9A69

Amount of Each Receipt this Period

250.00

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

750.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. William A. Simpson

Mailing Address 2237 Greenside Drive

City

Springfield

State

IL

Zip Code

62704-3245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	8

Transaction ID: ADC373C64B62F4ACE919

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Mary Anne Holloway

Mailing Address PO Box 13317

City

Springfield

State

IL

Zip Code

62791-3317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prairie Heart

Occupation

Nurse

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	8

Transaction ID: ABB7A084BD3654ECC9BD

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Henry W. Rapp, Jr.

Mailing Address 206 E. Adams  
Apt. N2

City

Morton

State

IL

Zip Code

61550-2047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	8

Transaction ID: ADE7A9727EB444303B2E

Amount of Each Receipt this Period

1000.00

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Andrew D. Walter

Mailing Address 125 Elmridge Circle

City

East Peoria

State

IL

Zip Code

61611-4765

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Professionals LTD

Occupation

Director of Operations

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A7786CF6288664B4B989

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Patricia Hagenbuch

Mailing Address 1425 E Glen Ave

City

Peoria Heights

State

IL

Zip Code

61616-5341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philippi-Hagenbuch, Inc.

Occupation

Co-Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A16FD0658943749F2B30

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Shirley C. Coyle

Mailing Address 216 W. Stratford Drive

City

Peoria

State

IL

Zip Code

61614-7347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A6412E81D52234FDE927

Amount of Each Receipt this Period

1000.00

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

1550.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Roger Meyer

Mailing Address 523 W Northgate Rd

City

Peoria

State

IL

Zip Code

61614-2041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OSF

Occupation

Fundraiser

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A2ED5B60523EE436ABE0

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Craig Thompson

Mailing Address 1603 N. Holiday Ln

City

Trivoli

State

IL

Zip Code

61569-9643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thompson Electronics

Occupation

Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A109AA29DDADE419E91D

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald L. Wiegand

Mailing Address 1901 Mitchell Dr

City

Eureka

State

IL

Zip Code

61530-1628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Early Bird Fertilizer

Occupation

Crop Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: A485E8C11342B4C6A899

Amount of Each Receipt this Period

100.00

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

850.00

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



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Harold Zimmerman

Mailing Address 27127 Queenwood

City

Morton

State

IL

Zip Code

61550-9256

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

Transaction ID: AC34A4EE4D8094C5A91A

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Cara Nussbaum

Mailing Address 5621 W. Grande Circle

City

Peoria

State

IL

Zip Code

61615-2273

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benningfield & Assoc.

Occupation

Chiropractic Assistance

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Transaction ID: AD1795D68722041DFA5A

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Michele J. Richey

Mailing Address 1412 SW Washington St

City

Peoria

State

IL

Zip Code

61602-1746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tri-City Machine Products,  
Inc.

Occupation

CFO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Transaction ID: A166A257D147845B484D

Amount of Each Receipt this Period

1000.00

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

1150.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Juanita M. Neuenschwander

Mailing Address 6800 S. Stranz Rd

City

Mapleton

State

IL

Zip Code

61547-9388

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	8

Transaction ID: A8B40C89D9FF741629FB

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lynn McPheeters

Mailing Address 7226 N Charles Way

City

Peoria

State

IL

Zip Code

61614-2166

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	8

Transaction ID: A64F63074887241A8A22

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Diestelhorst

Mailing Address 1281 N. Crabtree Ct

City

East Peoria

State

IL

Zip Code

61611-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	8

Transaction ID: A63A1AFEEEDAE4F47B31

Amount of Each Receipt this Period

150.00

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

600.00

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 43 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Keith H. Ifft

Mailing Address P o Box 9735

City

Peoria

State

IL

Zip Code

61612-9735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Physician

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Transaction ID: A376D29E8AC61415E962

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Anneliese Sinn

Mailing Address 906 W. Oak Glen Dr

City

Peoria

State

IL

Zip Code

61614-4258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Transaction ID: AC586A7DCEE4A4922BDB

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert F. Blume

Mailing Address 111 Cliffwood Ct.

City

East Peoria

State

IL

Zip Code

61611-2101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Home Builder

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Transaction ID: A5C708C1760A74207B39

Amount of Each Receipt this Period

250.00

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 44 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Fennell

Mailing Address 1701 Bristol Hollow

City

Dunlap

State

IL

Zip Code

61525-9156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chillicothe Metal Co.

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 8

Transaction ID: A2D5E21A9E7FF41EAB55

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. Leslie E. Johnson

Mailing Address 11335 N. Antler Place

City

Peoria

State

IL

Zip Code

61615-1007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Medical Group

Occupation

Physician

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  
0 4 / 2 8 / 2 0 0 8

Transaction ID: A35267C1A5D2946F1949

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Auren Hoffman

Mailing Address 1328 Mission St. #4

City

San Francisco

State

CA

Zip Code

94103-2630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rapleaf

Occupation

CEO

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A3860DEBF0B69440095C

Amount of Each Receipt this Period

1000.00

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Clifford D. Shoff

Mailing Address 1835 E Beach St

City

Peoria Heights

State

IL

Zip Code

61616-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Layman & Shoff Interior

Occupation

Interior Designer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A1949ED8BC2DC45C9B3D

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Thomas D Hoerr

Mailing Address 2722 W. Cedar Hills Drive

City

Dunlap

State

IL

Zip Code

61525-9602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greenview Companies

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A7CBCCEB47C0D4E35888

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Greg Gramm

Mailing Address 5544 E. Sheena Dr.

City

Scottsdale

State

AZ

Zip Code

85254-2959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Scottsdale Child Care

Occupation

Owner

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A0DB31BCAB23B45F196A

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. William Collins

Mailing Address 1238 Gold Crest Ct

City

Sherman

State

IL

Zip Code

62684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AF66446929BF54A808E8

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Lois E. Conrady

Mailing Address 2058 Old Rt 121

City

Lincoln

State

IL

Zip Code

62656-5333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AA44A2E41D03441B7876

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael A Ludvigsen

Mailing Address 1011 W. State

City

Jacksonville

State

IL

Zip Code

62650-1967

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benton and Associates, Inc.

Occupation

Senior Engineering Technician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A132FA8F3CCE242FF9DD

Amount of Each Receipt this Period

150.00

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Philip E. Chiles

Mailing Address 2244 Westrode Dr

City

Springfield

State

IL

Zip Code

62711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aspen Real Estate

Occupation  
Realtor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: ABA189F351B9448DA83C

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Diane Oberhelman

Mailing Address 6005 N. Kickapoo Edwards Rd.

City

Edwards

State

IL

Zip Code

61528-9707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cullinan Properties LTD

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A702FCB3C925441F3A95

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Albert Zeller

Mailing Address 548 E. High Pt Rd

City

Peoria

State

IL

Zip Code

61614-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Avanti's

Occupation  
Owner

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AD7468AC589A54E74BDA

Amount of Each Receipt this Period

1000.00

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

3550.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Bernie Robinson

Mailing Address 408 A Street S.E.

City

Washington

State

DC

Zip Code

20003-3807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Livingston Group

Occupation  
Lobbyist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AC017B1E257344DFDA28

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Douglas Oberhelman

Mailing Address 6005 N. Kickapoo-Edwards Rd

City

Edwards

State

IL

Zip Code

61528-9707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar

Occupation  
Divisional President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A6406BE0D91054AA3AE3

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Kimbell

Mailing Address 1333 H Street, NW

City

Washington

State

DC

Zip Code

20005-4707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jeffrey Kimbell and Associates

Occupation  
President/CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A9FD22E46B70D47D4AA1

Amount of Each Receipt this Period

250.00

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

3050.00

**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 49 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Jennie Haluska

Mailing Address 1822 W. Christine

City

Peoria

State

IL

Zip Code

61614-5618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DeKroyft-Metz & Co

Occupation

medical distribution director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A30D3157F5CD44879B36

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Judy Mangold

Mailing Address 510 Ridge Ln

City

Eureka

State

IL

Zip Code

61530-1542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A970CA3D961BE491EBEC

Amount of Each Receipt this Period

1100.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Roberta M. Keyser

Mailing Address 509 N. Minnesota

City

Morton

State

IL

Zip Code

61550-1735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IMI

Occupation

Brick layer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AF1F7B10813C04901BF8

Amount of Each Receipt this Period

250.00

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

1600.00

**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 50 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mark L. Gerson

Mailing Address 850 Third Avenue, 9th Floor

City

New York

State

NY

Zip Code

10022-7770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gerson Lehrman GroupOccupation  
Chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A191E2688F6304F679D3

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Erica Gerson

Mailing Address 850 Third Avenue, 9th Floor

City

New York

State

NY

Zip Code

10022-7770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jewish Community ProjectOccupation  
Rabbi

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A383152804A5B4643959

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mike Mangold

Mailing Address 510 Ridge Ln

City

Eureka

State

IL

Zip Code

61530-1542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OwnerOccupation  
Mike Mangold Ford

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: AA9623B60C57448CE8F0

Amount of Each Receipt this Period

1100.00

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

5700.00

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 51 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Don Tracy

Mailing Address 205 S. 5th Street, Suite 700

City

Springfield

State

IL

Zip Code

62701-1261

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown Hay & Stephens LLP

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A14A3D68F933C4E55861

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jason C. Roe

Mailing Address 106 Summers Drive

City

Alexandria

State

VA

Zip Code

22301-2443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federal Strategy Group

Occupation  
Managing Partner

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A1FB69DE3AE974842B8E

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Kary L. Scholl

Mailing Address 608 W. South Forest Trail

City

Peoria

State

IL

Zip Code

61615-4314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AA41A4E20710F45979F2

Amount of Each Receipt this Period

250.00

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

1400.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Karl B. Kuppler

Mailing Address 416 W. Crestwood Drive

City

Peoria

State

IL

Zip Code

61614-7228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hasselbert, Rock, Bell &  
Kuppler LLP

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AC6B866279A7A4A31A5B

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Kathryn Stelling

Mailing Address 20 Pine Tree Dr.

City

Springfield

State

IL

Zip Code

62704-3329

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill Lynch

Occupation

Financial Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AA3B4D28DCA864F7EB62

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Roberta L. Johnson

Mailing Address 3124 Temple Dr  
Po Box 9019

City

Springfield

State

IL

Zip Code

62704-5425

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Marketing

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A75A86ABD097A4019A06

Amount of Each Receipt this Period

150.00

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. J. Michael Barker

Mailing Address 1605 Ascot Chase

City

Sherman

State

IL

Zip Code

62684-8014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Springfield Electric Supp-  
ly Co.

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A121EF88C95234ABCAD1

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William J. Graff

Mailing Address 1172 100th Ave.

City

Middletown

State

IL

Zip Code

62666-9721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USDA/FSA

Occupation

State Executive Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A378E4DAC90CB452F865

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Lois C. Olson

Mailing Address 699 -500th St  
P.o. Box 147

City

Elkhart

State

IL

Zip Code

62634-0147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: ADBC84A06A8EF4FBBBF2

Amount of Each Receipt this Period

250.00

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

2800.00

**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 54 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Tate

Mailing Address 2212 Greenside Drive

City

Springfield

State

IL

Zip Code

62704-3218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance Agent of IL

Occupation  
Agent

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AC99D903110BF45DAAE9

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Nancy J. Green

Mailing Address 1455 NE Windermere Dr.

City

Tremont

State

IL

Zip Code

61568-9769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A568B0282085D4509A6C

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mike Cullinan

Mailing Address 324 Valleyview Ct

City

Peoria

State

IL

Zip Code

61615-1371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R.A Cullinan & Sons Inc

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A4D7130DB0B4D46EEAEC

Amount of Each Receipt this Period

2300.00

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

3900.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Larson

Mailing Address 7202 North Draycott Place

City

Peoria

State

IL

Zip Code

61615-9298

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar

Occupation

Management

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Transaction ID: A2650444542714070ACD

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth L. Walker

Mailing Address 7794 Farrand Rd.

City

Sherman

State

IL

Zip Code

62684-8144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Farmer

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Transaction ID: AD5584A60FD3844D58E7

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard Olson

Mailing Address 1499 Massachusetts Ave. NW  
#202B

City

Washington

State

DC

Zip Code

20005-2847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Astra Zeneca

Occupation

Federal governmental affairs

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Transaction ID: A4524A8668654438AB3B

Amount of Each Receipt this Period

500.00

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

1000.00

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 56 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. William M. Vala

Mailing Address 1275 Geary Rd

City

Cantrall

State

IL

Zip Code

62625-8874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community Care Systems,  
Inc.Occupation  
Owner

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A91F7464D057541789EC

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jim Montelongo

Mailing Address 3015 W. Brookside Dr.

City

Peoria

State

IL

Zip Code

61615-4011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACCSOccupation  
President

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A908C8C38C513462C955

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jeffery M. Wilday

Mailing Address 1427 Leland

City

Springfield

State

IL

Zip Code

62704-3445

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brownhay & Stephens, LLPOccupation  
Attorney

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

611.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: AE99FBD54D5AB455FA25

Amount of Each Receipt this Period

150.00

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

1400.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Bonnie J. Hodel

Mailing Address 6004 N. Sherwood Dr.

City

Peoria

State

IL

Zip Code

61614-4126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dist. 150

Occupation

Teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AAE0239E5C33C479BBD5

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William L. Hahn

Mailing Address 1236 Golf Crest Court

City

Springfield

State

IL

Zip Code

62707-7601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

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  
0 4 / 2 9 / 2 0 0 8

Transaction ID: AD63A2B3607A24C44879

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mark Newton

Mailing Address 1014 W. Kensington Drive

City

Peoria

State

IL

Zip Code

61614-4215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMCO Water Metering Systems

Occupation

Sales Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: A1B7F31E1451B4A229CD

Amount of Each Receipt this Period

250.00

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

1500.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. James W. Hefti

Mailing Address 6814 N. Greenwich Place

City

Peoria

State

IL

Zip Code

61615-6622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATS

Occupation

V.P. of Human Resources

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A0F3F885A439946578B5

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William Fischer

Mailing Address 4017 N. Grandview Dr

City

Peoria

State

IL

Zip Code

61614-6624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PSD # 150

Occupation

Assoc. Superintendent

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	8

Transaction ID: A772862BF645B45CE9A8

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Hilarie J. Jones

Mailing Address 5810 N. Prospect Rd.

City

Peoria

State

IL

Zip Code

61614-4310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	8

Transaction ID: A74A101030ADA4D8D826

Amount of Each Receipt this Period

250.00

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

700.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Michael Vidas

Mailing Address 701 Beechwood Ct

City

Peoria

State

IL

Zip Code

61615-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peoria Ear Nose and ThroatOccupation  
Physician

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Transaction ID: A63AA5532D9AA48B9948

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Roslyn L. Adams

Mailing Address 1200 W. Moss Ave

City

Peoria

State

IL

Zip Code

61606-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bard Peripheral VascularOccupation  
Territory Manager

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Transaction ID: A89A1183C20864792894

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Roger Heim

Mailing Address 4444 N. Knoxville #302

City

Peoria

State

IL

Zip Code

61614-6072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Real Estate

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: A7DF72AF9D8614877B03

Amount of Each Receipt this Period

100.00

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Catherine Abernathy

Mailing Address 11708 Buffington St

City

Bakersfield

State

CA

Zip Code

93312-4684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cathy

Occupation  
Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: AB5ABE3DAFC08415AACD

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Patrick L. Newman

Mailing Address 3700 Maple Hill Ln

City

New Berlin

State

IL

Zip Code

62670-4370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Newman-Alton, Inc.

Occupation  
Contractor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A87AF09ECB6C1443BB12

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Crystal L. Radee

Mailing Address 900 Main St., Ste 710

City

Peoria

State

IL

Zip Code

61602-5026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Nurse

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A15DE26CF75D142E193B

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Beverly Ketenbrink

Mailing Address 8720 N. Rt. 51

City

Decatur

State

IL

Zip Code

62526-8701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central IL Bldg Systems,  
Inc.

Occupation

Office Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A301A8BE56B954F459E5

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John McDonald

Mailing Address 512 W. Main St

City

Peoria

State

IL

Zip Code

61606-1449

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kallister-McDonald Realty,  
Inc.

Occupation

Realtor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A19946E3A148648F285E

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Elsie M. Holt

Mailing Address 1316 Ratley Rd

City

Altona

State

IL

Zip Code

61414-9426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A285ACC5E0CEA444587A

Amount of Each Receipt this Period

100.00

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

700.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Marguerite F. Cullinan

Mailing Address 324 Valleyview Ct

City

Peoria

State

IL

Zip Code

61615-1371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

Transaction ID: A38BCD1B0A39C4983971

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert L. Ketenbrink

Mailing Address 8720 N. Rt. 51

City

Decatur

State

IL

Zip Code

62526-8701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SpaceMark, Inc.

Occupation

Contractor

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

Transaction ID: A14EE92B214214B60A77

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Frank D. Ackerman

Mailing Address 416 N. Missouri Ave

City

Morton

State

IL

Zip Code

61550-1709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm

Occupation

Business Analyst

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: A8A4EE2B6CE634F8396A

Amount of Each Receipt this Period

50.00

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

750.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Jody L Baum

Mailing Address 123 SW Jefferson Ave., Ste. 108

City

Peoria

State

IL

Zip Code

61602-1222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: AD9F3D7BF6A03499CA57

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Cathy Steffen

Mailing Address 8 Kara Ct

City

Washington

State

IL

Zip Code

61571-2280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: AED3979354A01418E836

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Kathy Arkwell

Mailing Address 11204 N. Oakwood Dr

City

Peoria

State

IL

Zip Code

61615-1046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Orthodontist

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: A4BDA8F6287A1400789B

Amount of Each Receipt this Period

1000.00

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

3200.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Norma C. Ellington

Mailing Address 1227 W. Barker Ave

City

Peoria

State

IL

Zip Code

61606-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: AF581793BF90B4883AA7

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Kristina A. May

Mailing Address 5822 W. Forestwood Dr.

City

Peoria

State

IL

Zip Code

61615-6607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: A1D7450D7753F44989FB

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John Bearce

Mailing Address 12 Chrisendale Ln

City

Washington

State

IL

Zip Code

61571-1205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

Transaction ID: A08887D5BC81442D28AF

Amount of Each Receipt this Period

2300.00

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 65 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. John M. Tracy

Mailing Address 12326 Wedgeton Lane

City

Saint Louis

State

MO

Zip Code

63131-3837

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dot Foods, Inc.

Occupation  
Business

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: AB6273CEDAF2F4ED790C

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Henry Altorfer

Mailing Address PO Box 559

City

Peoria

State

IL

Zip Code

61651-0559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Facilities, Inc.

Occupation  
Chairman of Board

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: AC6AB0678777D47E3822

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Josh Bellamy

Mailing Address 2112 West Broadland Dr.

City

Dunlap

State

IL

Zip Code

61525-9394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Strategy

Occupation  
Pharmacist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: AF85AD5B4861342D8AE8

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dr. Steven J. Mahany

Mailing Address 11407 North Rd. 91

City  
Dunlap

State  
IL

Zip Code  
61525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Dentist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: A1761F0F61B144259B1C

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Dr. David Hendricksen

Mailing Address 448 E Town Hall Rd

City

Germantown Hills

State

IL

Zip Code

61548-9443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OSF

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: ADEAC12DDAD4A45D2B39

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Andy C. Chiou

Mailing Address PO Box 5358

City

Morton

State

IL

Zip Code

61550-5358

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: A290F68C3A6B74A869CF

Amount of Each Receipt this Period

300.00

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

750.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Bill Olson

Mailing Address 507 Constitution Ave. N.E. Apt 2

City

Washington

State

DC

Zip Code

20002-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Biotechnology

Occupation

Director, Federal Gov~t Relations

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	8

Transaction ID: A4A62CF78A8FC43AE996

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John D. Milne

Mailing Address 409 G St., SE 7-75

City

Washington

State

DC

Zip Code

20003-4257

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Management

Occupation

Senior Vice President

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	8

Transaction ID: A7A1AE3E96A6545D4962

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brent A. Del Monte

Mailing Address 1204 N. Utah Street

City

Arlington

State

VA

Zip Code

22201-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Biotechnology

Occupation

Vice President of Gov. Relations

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	8

Transaction ID: AC0681B2BEC424A5BA56

Amount of Each Receipt this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Royal R. Roth

Mailing Address 745 10th St , SE

City

Washington

State

DC

Zip Code

20003-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Public Affairs Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A63D61BAC2B354F89A05

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael W. Laukitis

Mailing Address 5002 Heinz Ln

City

Edwards

State

IL

Zip Code

61528-9544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alcast Co.

Occupation

Foundry

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: AB7D8FEDCB7824D06B40

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Bill Viney

Mailing Address 25723 Meadowhouse Ct.

City

South Riding

State

VA

Zip Code

20152-2588

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BGR Governmental Affairs,  
LLC

Occupation

Principal

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A7072CA3480884254A84

Amount of Each Receipt this Period

250.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. James M. Crum

Mailing Address 2317 Golden Chapel Rd.

City

Odenton

State

MD

Zip Code

21113-2535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Van Scoyoc Associates

Occupation

Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A46861E31D93D45A6BEA

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert D. Wood

Mailing Address 813 Vicar Lane

City

Alexandria

State

VA

Zip Code

22302-3420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Barbour Griffith & Rogers  
LLC

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A605C072AF0B64791BE9

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert Cowan

Mailing Address 3325 N. Bigelow St

City

Lacon

State

IL

Zip Code

61540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A80D94FD16EA64CA18D5

Amount of Each Receipt this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Patrick B. Carroll

Mailing Address 2785 24th Road South

City

Arlington

State

VA

Zip Code

22206-2509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Biotechnology

Occupation

Director/Federal Govt Relations

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A2144192F9B244EFFB9C

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Stephanie Moresco

Mailing Address 809 W Grand Oak Drive

City

Peoria

State

IL

Zip Code

61615-1149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 8

Transaction ID: A921B371913974562940

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Roslyn L. Adams

Mailing Address 1200 W. Moss Ave

City

Peoria

State

IL

Zip Code

61606-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bard Peripheral Vascular

Occupation

Territory Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 8

Transaction ID: AD91BCFE9706B4980916

Amount of Each Receipt this Period

1000.00

In-kind:

**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 71 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Leland Zimmerman

Mailing Address 120 E. Graham St

City

Eureka

State

IL

Zip Code

61530-1057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 8

Transaction ID: A6B941C97DE3B43BA80E

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Rebecca W. Pape

Mailing Address 11230 Oak Trail Dr

City

Peoria

State

IL

Zip Code

61615-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 8

Transaction ID: A9AA62FDB48EE40E1990

Amount of Each Receipt this Period

2200.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Roxanne M Williams

Mailing Address 17356 Red Shale Hill Road

City

Pekin

State

IL

Zip Code

61554-8607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Illini Central Consolidat-  
ed School Dis

Occupation

Teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 8

Transaction ID: A3C5232EC177B4B59B6F

Amount of Each Receipt this Period

500.00

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

2950.00

**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 72 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Wayne E. Baum

Mailing Address 4970 Grandview Dr

City

Peoria Heights

State

IL

Zip Code

61616-5373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Core Constructions Group

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: A00651728A6284E64953

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Walter Kiefer

Mailing Address 12693 Tamiami Trail E.  
Pmb 213

City

Naples

State

FL

Zip Code

34113-8424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: A7CE27B232591461AACF

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Patricia A Edwards-Lindstrom

Mailing Address 4707 W Weaverridge Road

City

Peoria

State

IL

Zip Code

61615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Creative Logic, Inc

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: A201FF50941A84F1688B

Amount of Each Receipt this Period

750.00

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

3550.00

**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 73 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Sylvia Fites

Mailing Address 602 E High Point Road

City

Peoria

State

IL

Zip Code

61614-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

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

Transaction ID: AA2C7DAA08B3E44DAA6A

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Sylvia Fites

Mailing Address 602 E High Point Road

City

Peoria

State

IL

Zip Code

61614-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

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

Transaction ID: AD846167162304F02B2B

Amount of Each Receipt this Period

2300.00

Primary 2008 Debt Retirement

**C.**

Full Name (Last, First, Middle Initial)

Mr. Don V. Fites

Mailing Address 602 East Highpoint

City

Peoria

State

IL

Zip Code

61614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

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

Transaction ID: AF9B6A39C427840F2960

Amount of Each Receipt this Period

1300.00

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

5900.00

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 74 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Don V. Fites

Mailing Address 602 East Highpoint

City

Peoria

State

IL

Zip Code

61614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

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

Transaction ID: AD4AAB14EC1414301A6D

Amount of Each Receipt this Period

2300.00

Primary 2008 Debt Retirement

**B.**

Full Name (Last, First, Middle Initial)

Mr. Stephen Jackson

Mailing Address 4825 N. Grandview Dr

City

Peoria Heights

State

IL

Zip Code

61616-5420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peoria Siding and Window

Occupation

Owner

Receipt For: 2008

☐ Primary
 ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Transaction ID: A730B5BEE887A42B3BFA

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Margaret F Jackson

Mailing Address 4825 N Grandview Drive

City

Peoria Heights

State

IL

Zip Code

61616-5420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary
 ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Transaction ID: AB4E0967041CE465BA91

Amount of Each Receipt this Period

2300.00

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

6900.00

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 75 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jim W Owens

Mailing Address 5504 N. Prospect Rd

City

Peoria Heights

State

IL

Zip Code

61616-4322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar Inc

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A30A1CF61A8A74D5CB64

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Fred L Moore

Mailing Address 6724 N Host Circle

City

Peoria

State

IL

Zip Code

61614-3153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: A408CF850FEEC44EBB22

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Kathrine M Owens

Mailing Address 5504 N Prospect Road

City

Peoria Heights

State

IL

Zip Code

61616-4322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A3E6283F857AF4B9E922

Amount of Each Receipt this Period

2300.00

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

4700.00

**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 76 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Peter H. Huizenga

Mailing Address 44 Baybrook Rd

City

Oak Brook

State

IL

Zip Code

60523-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Huizenga Capital Manageme-  
ntOccupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	8

Transaction ID: A6323945209874DD68D8

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gregory F Sharpe

Mailing Address 22364 State HWY. 156

City

Ewing

State

MO

Zip Code

63440-2634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Farmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	8

Transaction ID: AD7136462E978451E93F

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Mike Dalton

Mailing Address 12903 N. Georgetowne Rd

City

Dunlap

State

IL

Zip Code

61525-9469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maui JimOccupation  
CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: ABD1C60AB475D4C1C852

Amount of Each Receipt this Period

2300.00

Primary 2008 Debt Retirement

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

4850.00

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 77 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Mike Dalton

Mailing Address 12903 N. Georgetowne Rd

City

Dunlap

State

IL

Zip Code

61525-9469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maui JimOccupation  
CEO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Transaction ID: A19CB24F6121D4588B27

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Mary Dalton

Mailing Address 12903 Georgetowne Road

City

Dunlap

State

IL

Zip Code

61525-9469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Transaction ID: AF5766BECFD124C62A30

Amount of Each Receipt this Period

1400.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Claire G Mazer

Mailing Address 800 N Michigan Avenue 5601

City

Chicago

State

IL

Zip Code

60611-2159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	8

Transaction ID: AE6515F8056394FC9BD5

Amount of Each Receipt this Period

2300.00

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

6000.00

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 78 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Susan L. Breheny

Mailing Address P o Box 14

City

Forsyth

State

IL

Zip Code

62535-0014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID: AC4D0F972E2A24EF085F

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Shelton

Mailing Address 5405 North Knoxville

City

Peoria

State

IL

Zip Code

61614-5016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heartcare Midwest

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: A29D2958BCE904F78930

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin J. Breheny

Mailing Address 847 Jason's Way

City

Forsyth

State

IL

Zip Code

62535-9648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.L. Hubbard Insurance and  
Bonds

Occupation

President

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

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

Transaction ID: A4B6C073A96914950A5A

Amount of Each Receipt this Period

2300.00

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

5100.00

**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 79 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Heidi A. Huizenga

Mailing Address 44 Baybrook Ln

City

Oak Brook

State

IL

Zip Code

60523-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

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

Transaction ID: AFDE4B5C70AAA44CA9A9

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jerry L Hayden

Mailing Address 357 Deepwood Road

City

Barrington

State

IL

Zip Code

60010-8619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: A33F69712E10146C0AE5

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Denis J Healy

Mailing Address 625 Willowbrook Centre Parkway

City

Willowbrook

State

IL

Zip Code

60527-7969

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Turtlewax, Inc

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: A0EF097A60E1941AF8AC

Amount of Each Receipt this Period

2300.00

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

5600.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Larry J Hochberg

Mailing Address 275 N Deere Park E

City

Highland Park

State

IL

Zip Code

60035-5343

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: A23DADE4DD1C14E4B94D

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Maribeth Durham

Mailing Address 847 Lake Wildwood Drive

City

Varna

State

IL

Zip Code

61375-9562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: AC3F1650E336F49BFAD7

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gene Matiak

Mailing Address P o Box 147

City

Mark

State

IL

Zip Code

61340-0147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Buckman Iron

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: AA68A336B551E47969AD

Amount of Each Receipt this Period

100.00

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

1900.00

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



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael Bigger

Mailing Address 110 Butler St

City

Wyoming

State

IL

Zip Code

61491-1140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance

Occupation  
Insurance

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1089.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: A7C294FC7DE8B4D0EA00

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Howard Simpson

Mailing Address 4203 N. Chelsea Place

City

Peoria

State

IL

Zip Code

61614-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: AEA53CAA7B830477DB1F

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Scott D. Hoerr

Mailing Address 1529 Windsor Dr

City

Quincy

State

IL

Zip Code

62305-1471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: AC326003AF5004B43B88

Amount of Each Receipt this Period

1500.00

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

2150.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Philip S. McCully

Mailing Address PO Box 97

City

Toluca

State

IL

Zip Code

61369-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philip McCully & Associates Inc.

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1295.00

Date of Receipt

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

Transaction ID: AA61053EA6E2F4B3B9C3

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence E Tangel

Mailing Address 4837 N. Grandview Dr

City

Peoria Heights

State

IL

Zip Code

61616-5420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: ABFB45D7D4D114268BB2

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl Adams, Jr.

Mailing Address 909 Cypress Pt

City

Quincy

State

IL

Zip Code

62305-6370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ayerco Convenience Center

Occupation  
President

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  
0 6 / 0 6 / 2 0 0 8

Transaction ID: A573F480F3CD44E06A83

Amount of Each Receipt this Period

500.00

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

1300.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Gary Nester

Mailing Address 10921 N Rhonda Way

City  
Dunlap

State  
IL

Zip Code  
61525-9010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: A16CB6C3888B645D1AAC

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jerry L Hayden

Mailing Address 357 Deepwood Road

City  
Barrington

State  
IL

Zip Code  
60010-8619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: AFD7007EEA72D489B919

Amount of Each Receipt this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)

Patrick Dawson

Mailing Address 705 Christopher

City  
Forsyth

State  
IL

Zip Code  
62535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Miles Chevrolet

Occupation  
Auto Dealer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: AC16532C7D05141609FF

Amount of Each Receipt this Period

2300.00

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

3650.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Marilyn J Hayden

Mailing Address 352 Deep Wood Road

City

Barrington

State

IL

Zip Code

60010-8618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: A5F47CAB8C54B46248D4

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Barbara Griffith

Mailing Address PO Box 38

City

Mc Nabb

State

IL

Zip Code

61335-0038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Griffith Seed Co.

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: AC4622D3BE8E145B3AC2

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Elizabeth A. Mack

Mailing Address P o Box 61

City

Hennepin

State

IL

Zip Code

61327-0061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sweikert & Ganassin

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: AA13ACDB3337A4E0C9E7

Amount of Each Receipt this Period

50.00

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

2650.00

**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  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Natalie A Stratton

Mailing Address 2518 College

City

Quincy

State

IL

Zip Code

62301-3530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advance Physical Therapy

Occupation  
Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A2DF1E6BC44414C4085A

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jason R. Stratton

Mailing Address 2518 College St

City

Quincy

State

IL

Zip Code

62301-3530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Physical Therapy

Occupation  
President CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A20C5AD1519BF40D697A

Amount of Each Receipt this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Darren Frye

Mailing Address 112 Fawn Court

City

Washington

State

IL

Zip Code

61571-1084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Agri-Business Solutions

Occupation  
President/Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: A8B5C74BD5F8E482981A

Amount of Each Receipt this Period

600.00

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

4200.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Becky Frye

Mailing Address 112 Fawn Ct

City

Washington

State

IL

Zip Code

61571-1084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Agri-Business Solutions

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

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

Transaction ID: AEFAAABD0CDAC4AD4B07

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul Bauer

Mailing Address 2313 Stat Rt 17  
Po Box 482

City

Varna

State

IL

Zip Code

61375

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marshall County

Occupation  
State's Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: A3EC243D13C3C449186D

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Michelle M. Adamson

Mailing Address 1324 Hickory Hills Ln

City

Germantown Hills

State

IL

Zip Code

61548-9418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: A4BF5E940B8AF4CF38EB

Amount of Each Receipt this Period

2300.00

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

4950.00

**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 87 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert L. Cofoid

Mailing Address 208 S. McCoy

City

Granville

State

IL

Zip Code

61326-9332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Funeral Chapel

Occupation

Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 4 / 2 0 0 8

Transaction ID: A1FDA64595B79404E910

Amount of Each Receipt this Period

50.00

In-kind:

**B.**

Full Name (Last, First, Middle Initial)

Mr. David Ward

Mailing Address 208 E. Sycamore  
Po Box 91

City

Hennepin

State

IL

Zip Code

61327-0091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Central Bank

Occupation

Banker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: A1F40CE18A3004776A00

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael S Johnson

Mailing Address 1728 Mayfair Place

City

Crofton

State

MD

Zip Code

21114-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OB-C Group

Occupation

Principal

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: A425E1C9968A84F229AA

Amount of Each Receipt this Period

500.00

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

900.00

**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 88 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. David Q Bell

Mailing Address 4505 N Knoxville Avenue

City

Peoria

State

IL

Zip Code

61614-6101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A17A97CD41C8D430C8B7

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Jim Cote

Mailing Address 201 W. Greystone

City

Dunlap

State

IL

Zip Code

61525-9460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: A1B82861407434BBFBEA

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Robert L. Cofoid

Mailing Address 208 S. McCoy

City

Granville

State

IL

Zip Code

61326-9332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Funeral Chapel

Occupation

Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: A8AFBD01667DF4B8FA83

Amount of Each Receipt this Period

300.00

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

3100.00

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 89 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gloria Bahaj

Mailing Address 301 SW Adams St

City

Peoria

State

IL

Zip Code

61602-1501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A26CD904405984083BD2

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Alma Toedter

Mailing Address 507 S. Sheridan St

City

Granville

State

IL

Zip Code

61326-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1180.00

Date of Receipt

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

Transaction ID: A03523BA27CB34878AFF

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Ali Bahaj

Mailing Address 301 SW Adams

City

Peoria

State

IL

Zip Code

61602-1501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar Inc

Occupation  
Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A156F22CD02B941F0A20

Amount of Each Receipt this Period

2300.00

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

4800.00

**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 90 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Mary A Bell

Mailing Address 4505 N Knoxville Ave

City

Peoria

State

IL

Zip Code

61614-6101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar Inc

Occupation

Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: AF132229B72445C39A9

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Teresa R Koch

Mailing Address 1423 Lourdes Road

City

Metamora

State

IL

Zip Code

61548-7609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A9FD6218F3FF7444B9A6

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jim P. Ghiglieri, Jr.

Mailing Address 207 N. Via Ghiglieri

City

Toluca

State

IL

Zip Code

61369-9778

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpha Financial Group

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1432.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: A04CED4220D674762A30

Amount of Each Receipt this Period

500.00

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

5100.00

**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 91 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

A.

Full Name (Last, First, Middle Initial)

Mashantucket Pequot National Government Affairs Of

Mailing Address 101 Constitution Avenue, NW  
Suite 800City State Zip Code  
Washington DC 20001-2133FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information RequestedReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: A5064219E611645DFA17

Amount of Each Receipt this Period

1000.00

Primary 2008 Debt Retirement

B.

Full Name (Last, First, Middle Initial)

Mrs. Jennifer Reichman

Mailing Address 314 N. Willow St

City State Zip Code  
Toluca IL 61369-9692FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information RequestedReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: A659D87B5AEAF446B9F0

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Gramkow

Mailing Address 4713 N. Prospect Rd

City State Zip Code  
Peoria Heights IL 61616-6439FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm InsuranceOccupation  
AgentReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: AF1CE3897A6654C848C9

Amount of Each Receipt this Period

150.00

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

1350.00

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 92 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael Bigger

Mailing Address 110 Butler St

City

Wyoming

State

IL

Zip Code

61491-1140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Farm Insurance

Occupation  
Insurance

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1319.00

Date of Receipt

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

Transaction ID: A8891A3E66C1046279D2

Amount of Each Receipt this Period

230.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Brent Lindstrom

Mailing Address 4707 Weaverridge

City

Peoria

State

IL

Zip Code

61615-8949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CGN

Occupation  
Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

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

Transaction ID: A30CCCE51F8BA45528D1

Amount of Each Receipt this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter Bensinger

Mailing Address 600 Mayflower

City

Lake Forest

State

IL

Zip Code

60045-2310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bensinger, Dupont & Assoc

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: A41894D63BA9D412A948

Amount of Each Receipt this Period

500.00

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

1480.00

**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 93 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Patricia A Edwards-Lindstrom

Mailing Address 4707 W Weaverridge Road

City

Peoria

State

IL

Zip Code

61615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Creative Logic, Inc

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: A3F6EA92D37DF47399BA

Amount of Each Receipt this Period

750.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert A Meng

Mailing Address 518 E Chicago Avenue

City

Naperville

State

IL

Zip Code

60540-5410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: AFA59F0F7BB454921BB0

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Eric S. Swartz

Mailing Address Box 174

City

Henry

State

IL

Zip Code

61537-0174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: A85CEE23364DE4CA5A0C

Amount of Each Receipt this Period

150.00

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

3200.00

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

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

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

FOR LINE NUMBER: PAGE 94 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Eric S. Swartz

Mailing Address Box 174

City

Henry

State

IL

Zip Code

61537-0174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: A4429A6A56C2A40DBBC5

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Fredrick J. Campbell

Mailing Address 401 W. 1st North St

City

Wenona

State

IL

Zip Code

61377-7566

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois Dept.  
of Transportat

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: A063D7697A792408FA32

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Florence L Banwart

Mailing Address 12918 N Georgetowne Road

City

Dunlap

State

IL

Zip Code

61525-9468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: AC6540DCAA0614DADAD8

Amount of Each Receipt this Period

2300.00

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

2575.00

**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 95 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Sidney Banwart

Mailing Address 12918 N. Georgetown Rd

City  
DunlapState  
ILZip Code  
61525-9468FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CaterpillarOccupation  
VP

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Transaction ID: A79AB4FB55E184F91998

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William R Molinari

Mailing Address 4N995 Grandmas Lane

City  
St CharlesState  
ILZip Code  
60175-4730FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Transaction ID: A59B83935D72F4444B31

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brian Justin Meierkord

Mailing Address 917 Harmony Lane  
PO Box 188City  
LaconState  
ILZip Code  
61540-1721FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marshall County Title Com-  
panyOccupation  
Owner

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Transaction ID: AFC9A021927F446E3A6E

Amount of Each Receipt this Period

350.00

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

3650.00

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

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

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

FOR LINE NUMBER: PAGE 96 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. William Rohner

Mailing Address 327 Valleyview Ct

City

Peoria

State

IL

Zip Code

61615-1371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar

Occupation

Vice President

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  
0 6 / 2 3 / 2 0 0 8

Transaction ID: ADA906904BD7F4ED5B52

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Lyneve C Wunning

Mailing Address 471 E High Point Lane

City

Peoria

State

IL

Zip Code

61614-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

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  
0 6 / 2 4 / 2 0 0 8

Transaction ID: A70F7CBEF3F29469A836

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter Borzak

Mailing Address 939 Beverly Place

City

Deerfield

State

IL

Zip Code

60015-3443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: A5CC2C9EA53A6420F971

Amount of Each Receipt this Period

2300.00

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

4300.00

**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 97 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Sharon McCully

Mailing Address PO Box 97

City

Toluca

State

IL

Zip Code

61369-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philip McCully & Associates Inc.

Occupation

Administration

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: A6B673678343E45D9A7E

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Megan Schmidgall

Mailing Address 5587 Fairway Drive

City

Burlington

State

IA

Zip Code

52601-8670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: AFB E9684EF1C44295BB1

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Eloise Gates

Mailing Address 568W Hawthorne Place

City

Chicago

State

IL

Zip Code

60657-2923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: A2FE487F46DBA43BAA21

Amount of Each Receipt this Period

2300.00

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

4750.00

**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 98 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. John S Gates

Mailing Address 568 Hawthorne Place

City

Chicago

State

IL

Zip Code

60657-2923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PortaeCo, LLC

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: AB55B6BA4BBC349409C8

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Terry Judd

Mailing Address 906 E. Market

City

Hennepin

State

IL

Zip Code

61327-9605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hennepin Food Mart

Occupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: A46B815C141E94AE280F

Amount of Each Receipt this Period

340.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brad Schmidgall

Mailing Address 5587 Fairway Drive

City

Burlington

State

IA

Zip Code

52601-8670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: AA559B4B16F964BEA835

Amount of Each Receipt this Period

2300.00

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

4940.00

**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 99 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Deborah A. Dahl

Mailing Address 12768 State Hwy 89

City

Granville

State

IL

Zip Code

61326-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: A3DF5CB7B00D643AE9FE

Amount of Each Receipt this Period

30.00

In-kind:

**B.**

Full Name (Last, First, Middle Initial)

Mr. Alan J Rassi

Mailing Address 5718 N. Prospect Rd

City

Peoria

State

IL

Zip Code

61614-4326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2550.00

Date of Receipt

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

Transaction ID: A4465EF8372B3496C9A1

Amount of Each Receipt this Period

1300.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Hallie Maranchick

Mailing Address 1413 E. Abingdon Drive, #1

City

Alexandria

State

VA

Zip Code

22314-1164

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PhRMA

Occupation

Director of Federal Affairs

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: A591D60317464493BA53

Amount of Each Receipt this Period

300.00

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

1630.00

**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 100 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Donald Schielein

Mailing Address 914 Evergreen

City

Chillicothe

State

IL

Zip Code

61523-2049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: AAA7FAABC52A84EB2AFC

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Sonja J Rassi

Mailing Address 5718 N Prospect Road

City

Peoria

State

IL

Zip Code

61614-4326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: A898E3EA4AB6F4347816

Amount of Each Receipt this Period

700.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Darren Collier

Mailing Address 1615 Huntington Court

City

Flossmoor

State

IL

Zip Code

60422-1990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: A073CF2E043F9436FB8E

Amount of Each Receipt this Period

2000.00

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 101 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Royal R. Roth

Mailing Address 745 10th St , SE

City

Washington

State

DC

Zip Code

20003-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Public Affairs Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID: AA061CA418038469CB61

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Alma Toedter

Mailing Address 507 S. Sheridan St

City

Granville

State

IL

Zip Code

61326-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: A125CA1F5B8BA4B4CA97

Amount of Each Receipt this Period

50.00

In-kind:

**C.**

Full Name (Last, First, Middle Initial)

Mr. Jon D. Ware

Mailing Address 1553 Mound Ave

City

Jacksonville

State

IL

Zip Code

62650-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1775.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: AFC4561F6D6A246CD92C

Amount of Each Receipt this Period

225.00

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

775.00

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 102 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Dustin A. Mauldin

Mailing Address 880 Lee St, Ste 302

City

Des Plaines

State

IL

Zip Code

60016-6487

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AmeriCash LoansOccupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

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

Transaction ID: A7B295EF9D3D340E287A

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James R. Duncan

Mailing Address 745 E. Chambers

City

Jacksonville

State

IL

Zip Code

62650-2934

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IDOTOccupation  
Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: A325D3FFCBC7245B9B49

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Carol A Miller

Mailing Address 26102 Schuck Road

City

Washington

State

IL

Zip Code

61571-9585

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A07E7146631CE4AFA8CE

Amount of Each Receipt this Period

2300.00

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

2700.00

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 103 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Sam J Miller

Mailing Address 26102 Schuck Road

City

Washington

State

IL

Zip Code

61571-9585

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Miller Welding & Iron Wor-  
ks

Occupation

Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: A436DDD4FB1DB4B4A897

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Williams

Mailing Address 5130 Goldenrod Ct

City

Peoria

State

IL

Zip Code

61615-8916

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: AAA081FCFEA884D78BB5

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Edmond B Thornton

Mailing Address PO Box 1

City

Ottawa

State

IL

Zip Code

61350-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A3FC8CAF7966A4E77909

Amount of Each Receipt this Period

1000.00

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

5600.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 227

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lee Graves

Mailing Address 211 W. Northgate

City

Peoria

State

IL

Zip Code

61614-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELM EnterpriseOccupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: A2A46CDCA2853469B95D

Amount of Each Receipt this Period

1300.00

**B.**

Full Name (Last, First, Middle Initial)

Michel McCord

Mailing Address 5182 N. Prospect Rd

City

Peoria

State

IL

Zip Code

61616-5354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: A89EE29AB74DF4BE7AE2

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. George Buckman

Mailing Address 8 Oakdale Ave P O Box 188

City

Spring Valley

State

IL

Zip Code

61362-0188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1075.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: A67A1B15CFC5248D5966

Amount of Each Receipt this Period

1000.00

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

4600.00

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 105 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Arthur Seeds

Mailing Address 699 W Anita Lane

City

Princeton

State

IL

Zip Code

61356-2305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bureau Val Farm Mgmt

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: ADE737384CF484CAAB7F

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Sharon McCully

Mailing Address PO Box 97

City

Toluca

State

IL

Zip Code

61369-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philip McCully & Associat-  
es Inc.

Occupation

Administration

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

906.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AA2EA28B3989C4D9F8EC

Amount of Each Receipt this Period

456.10

In-kind:

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Sharon McCully

Mailing Address PO Box 97

City

Toluca

State

IL

Zip Code

61369-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philip McCully & Associat-  
es Inc.

Occupation

Administration

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

906.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A108AFA14AA71446BA1D

Amount of Each Receipt this Period

150.00

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

1106.10

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 106 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Chester Wynn

Mailing Address 31 Book Ln

City

Jacksonville

State

IL

Zip Code

62650-2753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Passavant Area Hospital

Occupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A5EF68C514EDF45838D9

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Alma Toedter

Mailing Address 507 S. Sheridan St

City

Granville

State

IL

Zip Code

61326-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1441.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A1FB2BC4F8D7647EEA44

Amount of Each Receipt this Period

211.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Merle Piacenti

Mailing Address 2221 Twin Oaks

City

Peru

State

IL

Zip Code

61354-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A6FF8374C93E344D497B

Amount of Each Receipt this Period

500.00

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

761.00

**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 107 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Brenda Johnson

Mailing Address 7406 N. Edgewild Dr  
Po Box 10010City State Zip Code  
Peoria IL 61614-2116FEC ID number of contributing  
federal political committee.**C**Name of Employer  
ACHOccupation  
PrincipleReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: ACAE2BFD3978F46FC98E

Amount of Each Receipt this Period

2300.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Brenda Johnson

Mailing Address 7406 N. Edgewild Dr  
Po Box 10010City State Zip Code  
Peoria IL 61614-2116FEC ID number of contributing  
federal political committee.**C**Name of Employer  
ACHOccupation  
PrincipleReceipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A630CF390EFF041C3886

Amount of Each Receipt this Period

2300.00

Primary 2008 Debt Retirem-  
ent**C.**

Full Name (Last, First, Middle Initial)

Mr. Harold E. Siegman

Mailing Address 108 W. Lafayette St

City State Zip Code  
Magnolia IL 61336-9753FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Quaker Lane EnterprisesOccupation  
OwnerReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: AF58EF40C6170464A98F

Amount of Each Receipt this Period

70.00

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

4670.00

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 108 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Arnold Buckman

Mailing Address PO Box 477

City

La Salle

State

IL

Zip Code

61301-0477

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Buckman SteelOccupation  
Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AD39D75BB1E33442C98A

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Glen Barton

Mailing Address 242 W. Detweiller Dr

City

Peoria

State

IL

Zip Code

61615-2113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: ABC39AA98EE9C4B40BD1

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Rachel Sluder

Mailing Address 2401 W Alta Road  
Apt 1605

City

Peoria

State

IL

Zip Code

61615-1297

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A8B92892AAD594994B10

Amount of Each Receipt this Period

600.00

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

3900.00

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

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

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

FOR LINE NUMBER: PAGE 109 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. B Violet Kellums

Mailing Address 10418 N Pheasant Lane

City

Peoria

State

IL

Zip Code

61615-8846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A0ED15F35775940F99A3

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Hon. Gary Dahl

Mailing Address 12768 IL Highway 89

City

Granville

State

IL

Zip Code

61326-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Illinois

Occupation

State Senator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A669746768D8E47439C8

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Timothy Muntz

Mailing Address 800 Old North Rd

City

Spring Valley

State

IL

Zip Code

61362-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Margaret's Hospital

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A2F6A145EAFED4952922

Amount of Each Receipt this Period

200.00

**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 110 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Timothy Muntz

Mailing Address 800 Old North Rd

City

Spring Valley

State

IL

Zip Code

61362-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Margaret's HospitalOccupation  
CEO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A93FB3C4D8B9B47CAA6C

Amount of Each Receipt this Period

180.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Timothy Muntz

Mailing Address 800 Old North Rd

City

Spring Valley

State

IL

Zip Code

61362-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Margaret's HospitalOccupation  
CEO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AA038DC0E96B04DCFB84

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Timothy Muntz

Mailing Address 800 Old North Rd

City

Spring Valley

State

IL

Zip Code

61362-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Margaret's HospitalOccupation  
CEO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A833A3ECC8F35409CB5C

Amount of Each Receipt this Period

200.00

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

480.00

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 111 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Timothy Muntz

Mailing Address 800 Old North Rd

City

Spring Valley

State

IL

Zip Code

61362-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Margaret's HospitalOccupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

880.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AFA6F512B4125487DA68

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Deborah A. Dahl

Mailing Address 12768 State Hwy 89

City

Granville

State

IL

Zip Code

61326-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3080.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: A9D2BE365F2C54303832

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Cornell Kane

Mailing Address 1311 Elm

City

Jacksonville

State

IL

Zip Code

62650-1033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AE112C46DCD7B4C9C952

Amount of Each Receipt this Period

150.00

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

2350.00

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 112 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven Fisher

Mailing Address 2201 W Augusta Drive

City

Dunlap

State

IL

Zip Code

61525-8703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Caterpillar

Occupation

Vice President

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AB3DD86206F784711B64

Amount of Each Receipt this Period

2000.00

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

2000.00

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

238087.10



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

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

FOR LINE NUMBER: PAGE 113 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Sangamon County Republican Central Committee

Mailing Address 1132 Sangamon Ave.

City State Zip Code  
Springfield IL 62702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 8

Transaction ID: A07C876899D524C38B15

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Morgan County Republican Central Committee

Mailing Address P.O. Box 397

City State Zip Code  
Jacksonville IL 62651-0397

FEC ID number of contributing  
federal political committee.

C

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  
0 4 / 2 8 / 2 0 0 8

Transaction ID: A702CD92B54574AA5BB2

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First St, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

C00075820

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

495.64

Date of Receipt

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

Transaction ID: AEF997D5B12804703984

Amount of Each Receipt this Period

103.64

In-kind:

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

1203.64

**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 114 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First St, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00075820

Name of Employer

Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

599.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

**Transaction ID:** A20FECB38918D4B37B93

Amount of Each Receipt this Period

103.64

In-kind:

**B.**

Full Name (Last, First, Middle Initial)  
Tazewell County Republican Central Committee

Mailing Address 1006 Kingsbury RD.

City State Zip Code  
Washington IL 61571-1209

FEC ID number of contributing  
federal political committee.

**C**

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  
0 5 / 0 9 / 2 0 0 8

**Transaction ID:** A429B003FC4244D7DA6F

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Menard County Republican Central Committee

Mailing Address 401 Hemlock Drive

City State Zip Code  
Petersburg IL 62675-9723

FEC ID number of contributing  
federal political committee.

**C**

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  
0 5 / 1 4 / 2 0 0 8

**Transaction ID:** A1390064187564269B04

Amount of Each Receipt this Period

1000.00

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

2103.64

**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 115 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mike R Fund

Mailing Address P.O. Box 2485

City

Springfield

State

VA

Zip Code

22152-0485

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

C00370791

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
0	5	/	1	4	/	2	0	0	8

Transaction ID: A90E34D8B132846E1ADB

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Sangamon County Republican Central Committee

Mailing Address 1132 Sangamon Ave.

City

Springfield

State

IL

Zip Code

62702

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

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
0	5	/	2	8	/	2	0	0	8

Transaction ID: AF4A6426D39194933A72

Amount of Each Receipt this Period

900.00

**C.**

Full Name (Last, First, Middle Initial)

National Republican Congressional Committee

Mailing Address 320 First St, SE

City

Washington

State

DC

Zip Code

20003

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

C00075820

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

702.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	0	8

Transaction ID: A7C72AEFDAE664FBB9D5

Amount of Each Receipt this Period

103.64

In-kind:

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

2003.64

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 116 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Putnam County Republican Central Committee

Mailing Address 507 S Sheridan Street

City

Granville

State

IL

Zip Code

61326-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

50.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

Transaction ID: A4A7142F63C44478F836

Amount of Each Receipt this Period

50.00

In-kind:

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

50.00

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

5360.92

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 410 First St, SE

City

Washington

State

DC

Zip Code

20003

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

C00053553

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: AD8C02089527B4D64851

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave NW  
South Bldg, Suite 600

City

Washington

State

DC

Zip Code

20004

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

C00007880

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: A28D5284BE0B24DBD984

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW  
Suite 400W

City

Washington

State

DC

Zip Code

20001

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

C00089136

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  
0 4 / 0 4 / 2 0 0 8

Transaction ID: AAAF8E071C8E54355AFC

Amount of Each Receipt this Period

1000.00

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 118 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 410 First St, SE

City

Washington

State

DC

Zip Code

20003

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

C00053553

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	0	8

Transaction ID: AE981CEFF5DBE48F5A40

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Mailing Address 1200 West 49th Street

City

Hialeah

State

FL

Zip Code

33012

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

C00387720

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
0	4		0	7		2	0	0	8

Transaction ID: ACB8A3607DF2B4ED4A94

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

RJReynolds PAC

Mailing Address P.O. Box 718  
401 N. Main St.

City

WINSTON-SALEM

State

NC

Zip Code

27102

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

C00042002

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	8

Transaction ID: ACFB59B1325414FCBB73

Amount of Each Receipt this Period

2500.00

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 119 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

John Morris for Congress

Mailing Address 4104 Chelsea Place

City

Peoria

State

IL

Zip Code

61614-6182

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

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1070.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

**Transaction ID:** A7AE956C3465E45F78BD

Amount of Each Receipt this Period

1070.91

**B.**

Full Name (Last, First, Middle Initial)

The Associated General Contractors of America PAC

Mailing Address 53 D Street, SE

City

Arlington

State

VA

Zip Code

22201

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

C00082917

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

**Transaction ID:** AEAFBCF49E6FB4143A50

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW  
Suite 700

City

Washington

State

DC

Zip Code

20004-2801

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

C00106146

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

**Transaction ID:** A365D0F807AC3471899B

Amount of Each Receipt this Period

5000.00

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

11070.91

**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 120 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Friends for Poe

Mailing Address P.O. Box 8862

City

Springfield

State

IL

Zip Code

62791

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

583.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	0	8

Transaction ID: A0B2306410A5441B6A69

Amount of Each Receipt this Period

458.20

In-kind:

**B.**

Full Name (Last, First, Middle Initial)

Hasara for Mayor

Mailing Address 1919 Montana Drive

City

Springfield

State

IL

Zip Code

62704

FEC ID number of contributing  
federal political committee.

C

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
0	4		2	9		2	0	0	8

Transaction ID: AD2ED81ACBEDE4AEC903

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (ECPAC)

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City

Bethesda

State

MD

Zip Code

20814-6302

FEC ID number of contributing  
federal political committee.

C

C00113811

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
0	4		2	9		2	0	0	8

Transaction ID: A5E8D7B75EAF840D7BF0

Amount of Each Receipt this Period

2000.00

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

3458.20

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 121 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

HANSON PROFESSIONAL SERVICES INC PAC

Mailing Address 1525 SOUTH SIXTH STREET

City

SPRINGFIELD

State

IL

Zip Code

62703

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

C00406124

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: A3480D9499BD048DCAB1

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

USBANCORP INC POLITICAL ACTION COMMITTEE

Mailing Address 216 FRANKLIN STREET

City

Johnstown

State

PA

Zip Code

15901-1911

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

C00320002

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
0	4	/	2	9	/	2	0	0	8

Transaction ID: A5AFA3355AD1B4E669EB

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Illinois National Bank PAC

Mailing Address 322 E. Capitol Ave.

City

Springfield

State

IL

Zip Code

62701

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

C00252973

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	8

Transaction ID: AC5AAD20EC3B34F5C8F6

Amount of Each Receipt this Period

150.00

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

1400.00

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 122 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

HELP AMERICA'S LEADERS POLITICAL ACTION COMMITTEE (HALPAC)

Mailing Address 1155 21st Street NW  
Suite 300City State Zip Code  
Washington DC 20036-3312FEC ID number of contributing  
federal political committee. **C** C00376038

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  
0 4 / 3 0 / 2 0 0 8

Transaction ID: A87A7908B9C914C6DB63

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Conservative Victory Fund

Mailing Address PO Box 15245

City State Zip Code  
Washington DC 20003-0245FEC ID number of contributing  
federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
407.70

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: A974DAD7B405041918D4

Amount of Each Receipt this Period

407.70

In-kind:

**C.**

Full Name (Last, First, Middle Initial)

RED PAC

Mailing Address Post Office Box 51

City State Zip Code  
Homeland FL 33847-0051FEC ID number of contributing  
federal political committee. **C** C00389122

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: A91A8D91BDA724910985

Amount of Each Receipt this Period

5000.00

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

6407.70

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street SE Suite 300

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing  
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

**Transaction ID:** A912DA81BFBB44E41B43

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL POLITICAL ACTION CMTE.

Mailing Address 1111 14th Street NW  
Suite 1200

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

**Transaction ID:** A24BAC967A1C04BCC8E4

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

FREEDOM PROJECT; THE

Mailing Address 424 C Street NE  
Basement UNIT

City	State	Zip Code
Washington	DC	20002-5818

FEC ID number of contributing  
federal political committee.**C** C00305805

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

**Transaction ID:** A58A3A2FAC56C4434A66

Amount of Each Receipt this Period

5000.00

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

12500.00

**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 124 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

John Deere PAC

Mailing Address 801 17th St  
2nd Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00204099

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

**Transaction ID:** AA49194ED911E47748A0

Amount of Each Receipt this Period

5000.00

Primary 2008 Debt Retirement

**B.**

Full Name (Last, First, Middle Initial)

Conservative Victory Fund

Mailing Address PO Box 15245

City State Zip Code  
Washington DC 20003-0245

FEC ID number of contributing  
federal political committee.

**C** C00009704

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

907.70

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

**Transaction ID:** AF02AABE5BFBA4D8893F

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL EDUCATION ASSOCIATION

Mailing Address 1201 16TH STREET, N.W.

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C70000492

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

**Transaction ID:** A27C2E843D7A54161B2D

Amount of Each Receipt this Period

5000.00

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

10500.00

**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 125 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Manzullo for Congress

Mailing Address P.O. Box 7783

City

Rockford

State

IL

Zip Code

61126-7783

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

C00252973

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
0	5		1	3		2	0	0	8

**Transaction ID:** AE1570AA50EE74B36973

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

John Deere PAC

Mailing Address 801 17th St  
2nd Floor

City

Washington

State

DC

Zip Code

20006

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

C00204099

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	8

**Transaction ID:** A8EE06FD9E01D416688E

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)

Mailing Address 5915 Eastman Avenue Suite 100

City

Midland

State

MI

Zip Code

48640-6824

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

C00350462

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
0	5		1	3		2	0	0	8

**Transaction ID:** A4B9404DFD1B04A869F0

Amount of Each Receipt this Period

1000.00

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

8000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

ITW Better Government Committee

Mailing Address 3600 W. Lake Ave.

City

Glenview

State

IL

Zip Code

60026-1215

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

C00000042

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Transaction ID: AE24F0A03A9094B5398E

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

ALLSTATE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1027 Connecticut Ave, NW  
Suite 1007

City

Washington

State

DC

Zip Code

20036

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

C00040253

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
0	5		1	4		2	0	0	8

Transaction ID: AEBACE0231F284EDAB3D

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address 1932 WYNNTON ROAD

City

COLUMBUS

State

GA

Zip Code

31999

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

C00034157

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Transaction ID: A8CA90298C2B445F9A2A

Amount of Each Receipt this Period

2500.00

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

8500.00

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 127 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

BANK OF AMERICA CORPORATION STATE AND FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1100 North King Street  
DE5-001-02-07

City State Zip Code  
Wilmington DE 19884-0011

FEC ID number of contributing federal political committee. **C** C00043489

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: AF8943964CFBF4723B62

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Conservative Victory Fund

Mailing Address PO Box 15245

City State Zip Code  
Washington DC 20003-0245

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

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1315.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: A9252DB61E262446A9C2

Amount of Each Receipt this Period

407.70

In-kind:

**C.**

Full Name (Last, First, Middle Initial)

WHOLESALE-DISTRIBUTORS PAC OF THE NATL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Mailing Address 1325 G Street NW, Ste 1000

City State Zip Code  
Washington DC 20005-3134

FEC ID number of contributing federal political committee. **C** C70002878

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: AE28E1E9E558047EABAB

Amount of Each Receipt this Period

1000.00

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

2407.70

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 227

(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)

Schock for Congress

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

Mailing Address 601 13th NW Ste 360N

City	State	Zip Code
Washington	DC	20005-3849

FEC ID number of contributing  
federal political committee.**C** C00018028

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
0	5		1	4		2	0	0	8

**Transaction ID:** AB54071D6389C448E871

Amount of Each Receipt this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
Cantor For Congress

Mailing Address PO Box 17813

City	State	Zip Code
Richmond	VA	23226-7813

FEC ID number of contributing  
federal political committee.**C** C00355461

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
0	5		1	6		2	0	0	8

**Transaction ID:** A61F35D7DB2AF43D282C

Amount of Each Receipt this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
Voice for Freedom PACMailing Address 2814 Spring Road  
Suite 103

City	State	Zip Code
Atlanta	GA	30339-3047

FEC ID number of contributing  
federal political committee.**C** C00409805

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
0	5		1	7		2	0	0	8

**Transaction ID:** A33018893048840C892F

Amount of Each Receipt this Period

1000.00

**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 129 / 227

(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)

Schock for Congress

**A.**Full Name (Last, First, Middle Initial)  
National Association of Mutual Insurance CompaniesMailing Address 3601 Vincennes Road  
PO BoxCity State Zip Code  
Indianapolis IN 46268-1154FEC ID number of contributing  
federal political committee. **C** C00170258

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: ADA9A7707D5394EB5BF6

Amount of Each Receipt this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
Kay Granger Campaign Fund

Mailing Address 715 Jones Street, Suite 100

City State Zip Code  
Fort Worth TX 76102-5473FEC ID number of contributing  
federal political committee. **C** C00310532

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  
0 5 / 2 7 / 2 0 0 8

Transaction ID: A84970A4BB82F452AA4E

Amount of Each Receipt this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
Walden for Congress, Inc

Mailing Address PO Box 1091

City State Zip Code  
Hood River OR 97031-0037FEC ID number of contributing  
federal political committee. **C** C00333427

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: A2238419AAD224D1096F

Amount of Each Receipt this Period

1000.00

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 130 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Morongo Band of Mission Indians Native American Rights Fund

Mailing Address 11581 Potrero Road

City State Zip Code  
Banning CA 92220-6946

FEC ID number of contributing federal political committee. **C** C90009622

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: A1712FE417C3547F38C7

Amount of Each Receipt this Period

2100.00

**B.**

Full Name (Last, First, Middle Initial)  
MINEPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION

Mailing Address 101 Constituion Ave NW  
Suite 500 East

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00304634

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  
0 6 / 0 5 / 2 0 0 8

Transaction ID: A785A9A7C8BD54A9A8A0

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
IFDAPAC

Mailing Address 201 Park Washington Court

City State Zip Code  
Falls Church VA 22046-4527

FEC ID number of contributing federal political committee. **C** C00383521

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: AF036F98A71364290BA4

Amount of Each Receipt this Period

2500.00

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

5100.00

**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 131 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

COALPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION

Mailing Address 101 Constitution Avenue NW, Ste 50  
Suite 500 EastCity State Zip Code  
Washington DC 20001FEC ID number of contributing  
federal political committee.**C** C00109819

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: A7BC9E3061883458BAE1

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Pfizer PAC

Mailing Address 235 East 42nd Street

City State Zip Code  
New York NY 10017-5703FEC ID number of contributing  
federal political committee.**C** C00016683

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  
0 6 / 0 5 / 2 0 0 8

Transaction ID: A8A1EA88D551F49E596B

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Conservative Victory Fund

Mailing Address PO Box 15245

City State Zip Code  
Washington DC 20003-0245FEC ID number of contributing  
federal political committee.**C** C00009704

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1717.05

Date of Receipt

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

Transaction ID: A1C457222AA144B7DA7A

Amount of Each Receipt this Period

401.65

In-kind:

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

3401.65

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  
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FOR LINE NUMBER: PAGE 132 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)

Mailing Address 5915 Eastman Avenue Suite 100

City

Midland

State

MI

Zip Code

48640-6824

FEC ID number of contributing  
federal political committee.

**C**

C00350462

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: ABE26BB90FB744F06A69

Amount of Each Receipt this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

OCPAC

Mailing Address PO Box 10995

City

Newport Beach

State

CA

Zip Code

92658-5015

FEC ID number of contributing  
federal political committee.

**C**

C00424358

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  
0 6 / 1 2 / 2 0 0 8

Transaction ID: A8313D733A2B34F37A5F

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Jim Jordan for Congress

Mailing Address 1709 State Route 560 S

City

Urbana

State

OH

Zip Code

43078-9637

FEC ID number of contributing  
federal political committee.

**C**

C00416594

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  
0 6 / 1 6 / 2 0 0 8

Transaction ID: A8E00A593DE074B2E8D2

Amount of Each Receipt this Period

1000.00

**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 133 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Realtors PAC

Mailing Address 430 N Michigan Avenue

City

Chicago

State

IL

Zip Code

60611-4011

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

C00030718

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	0	8

Transaction ID: AC97DCA6FAF2348D58D3

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE

Mailing Address 1111 North Fairfax Street

City

Alexandria

State

VA

Zip Code

22314

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

C00012880

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
0	6	/	2	0	/	2	0	0	8

Transaction ID: ADF482FA3223D4BEAB43

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 410 First St, SE

City

Washington

State

DC

Zip Code

20003

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

C00053553

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: A622F9D4470E04BF8A50

Amount of Each Receipt this Period

1000.00

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

7000.00

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

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

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

FOR LINE NUMBER: PAGE 134 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
National Conservative Campaign Fund

Mailing Address 1 Massachusetts Ave, NW  
Ste 630

City State Zip Code  
Washington DC 20001-1401

FEC ID number of contributing  
federal political committee. **C** C00348359

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  
0 6 / 2 4 / 2 0 0 8

**Transaction ID:** AB00ACFA4DAC2402B852

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Friends of Patrick Nichtig

Mailing Address 10507 N Sleepy Hollow Road

City State Zip Code  
Peoria IL 61615-1119

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

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

**Transaction ID:** A32A08AB44A404716B85

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
Conaway for Congress

Mailing Address PO Box 51272

City State Zip Code  
Midland TX 79710-1272

FEC ID number of contributing  
federal political committee. **C** C00383828

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  
0 6 / 2 6 / 2 0 0 8

**Transaction ID:** A12722F9357E74924801

Amount of Each Receipt this Period

1000.00

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

2200.00

**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 135 / 227

(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)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN FAMILY MUTUAL INSURANCE COMPANY FEDERAL PAC (AMFAM PAC)

Mailing Address 6000 American Parkway

City	State	Zip Code
Madison	WI	53783

FEC ID number of contributing  
federal political committee.**C** C00354290

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
0	6		2	6		2	0	0	8

**Transaction ID:** A0BD3FB9AFB7A4203BF4

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Pepsico Concerned Citizens Fund

Mailing Address Not Listed

City	State	Zip Code
Purchase	NY	10577

FEC ID number of contributing  
federal political committee.**C** C00039321

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
0	6		2	6		2	0	0	8

**Transaction ID:** A67AB96FC39DC4DD0800

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Issa for Congress

Mailing Address PO Box 760

City	State	Zip Code
Vista	CA	92085-0760

FEC ID number of contributing  
federal political committee.**C** C00350520

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
0	6		2	6		2	0	0	8

**Transaction ID:** AF7D52D86C643449883A

Amount of Each Receipt this Period

1000.00

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

2500.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 227

(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)

Schock for Congress

**A.**Full Name (Last, First, Middle Initial)  
Ranger PAC

Mailing Address PO Box 2485

City	State	Zip Code
Springfield	VA	22152-0485

FEC ID number of contributing  
federal political committee. **C** C00448787

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
0 6	/	2 6	/	2 0 0 8

Transaction ID: A99E76289B0BD4F9AA42

Amount of Each Receipt this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 BEACH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94109

FEC ID number of contributing  
federal political committee. **C** C70003785

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
10000.00

Date of Receipt

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

Transaction ID: ABE9C1DD7F6464EBE80F

Amount of Each Receipt this Period

5000.00

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

Mailing Address 1750 New York Avenue NW

City	State	Zip Code
Washington	DC	20006-5305

FEC ID number of contributing  
federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 6	/	2 7	/	2 0 0 8

Transaction ID: AC65FBD0F36CB4BCCB17

Amount of Each Receipt this Period

5000.00

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

11000.00

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



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

TRUSTPAC

Mailing Address 228 S Washington St  
Ste 115BSCity State Zip Code  
Alexandria VA 22314-5408FEC ID number of contributing  
federal political committee.**C** C00330720

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
0	6		2	7		2	0	0	8

Transaction ID: AD45FA0521B954C898B3

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

John S. Fund

Mailing Address 1208 Leland Avenue

City State Zip Code  
Springfield IL 62704FEC ID number of contributing  
federal political committee.**C** C00390831

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: A67A64553A3A7475DBD5

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: AFDE61E7B5C6D472088D

Amount of Each Receipt this Period

5000.00

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

8500.00

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 138 / 227

(check only one)

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

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L Street NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: A1CF677C62BDF40B98E4

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Longhorn PAC

Mailing Address 7315 Wisconsin Avenue  
Suite 705 East

City State Zip Code  
Bethesda MD 20814-3202

FEC ID number of contributing  
federal political committee. **C** C00402602

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  
0 6 / 3 0 / 2 0 0 8

Transaction ID: AE8CCA4B63A78435F952

Amount of Each Receipt this Period

1000.00

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

3000.00

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

126446.16

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 227

(check only one)

<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

CEFCU Citizens Equity Federal Credit Union

Mailing Address P.O. Box 1715

City

Peoria

State

IL

Zip Code

61656-1715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

708.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	8	

Transaction ID: A6E66F859185C4782BBB

Amount of Each Receipt this Period

63.65

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

63.65

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

63.65

# **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 140 / 227

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Roslyn L. Adams	<b>Transaction ID:</b> BD91BCFE9706B4980916 <b>Date of Disbursement</b>
Mailing Address 1200 W. Moss Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 6 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61606-1736	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind:	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mr. Robert L. Cofoid	<b>Transaction ID:</b> B1FDA64595B79404E910 <b>Date of Disbursement</b>
Mailing Address 208 S. McCoy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 8</div> </div>
City Granville State IL Zip Code 61326-9332	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind:	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Deborah A. Dahl	<b>Transaction ID:</b> B3DF5CB7B00D643AE9FE <b>Date of Disbursement</b>
Mailing Address 12768 State Hwy 89	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City Granville State IL Zip Code 61326-9433	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind:	<div>30.00</div>
Candidate Name	<div>Category/Type</div>
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) .....

1080.00

**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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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mrs. Alma Toedter</p> <p>Mailing Address 507 S. Sheridan St</p> <p>City Granville State IL Zip Code 61326-9542</p> <p>Purpose of Disbursement In-kind:</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B125CA1F5B8BA4B4CA97</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 7 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>50.00</div> </p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mrs. Sharon McCully</p> <p>Mailing Address PO Box 97</p> <p>City Toluca State IL Zip Code 61369-0097</p> <p>Purpose of Disbursement In-kind:</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA2EA28B3989C4D9F8EC</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>456.10</div> </p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 First St, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-kind:</p> <p>Candidate Name National Republican Congressional Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BEF997D5B12804703984</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>103.64</div> </p> <p>Category/Type</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>609.74</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.** Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind:

Candidate Name  
National Republican Congressional Committee

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B20FECB38918D4B37B93

Date of Disbursement

/   /

Amount of Each Disbursement this Period

103.64

**B.** Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind:

Candidate Name  
National Republican Congressional Committee

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7C72AEFDAE664FBB9D5

Date of Disbursement

/   /

Amount of Each Disbursement this Period

103.64

**C.** Full Name (Last, First, Middle Initial)  
Putnam County Republican Central Committee

Mailing Address 507 S Sheridan Street

City Granville State IL Zip Code 61326-9542

Purpose of Disbursement  
In-kind:

Candidate Name  
Putnam County Republican Central Committee

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4A7142F63C44478F836

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

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

257.28

**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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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Friends for Poe	<b>Transaction ID:</b> B0B2306410A5441B6A69 <b>Date of Disbursement</b>
Mailing Address P.O. Box 8862	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62791	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind: <div></div> Candidate Name Friends for Poe <div>Category/Type</div>	<div>458.20</div>
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>B.</b> Full Name (Last, First, Middle Initial) Conservative Victory Fund	<b>Transaction ID:</b> B974DAD7B405041918D4 <b>Date of Disbursement</b>
Mailing Address PO Box 15245	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-0245	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind: <div></div> Candidate Name Conservative Victory Fund <div>Category/Type</div>	<div>407.70</div>
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>C.</b> Full Name (Last, First, Middle Initial) Conservative Victory Fund	<b>Transaction ID:</b> B9252DB61E262446A9C2 <b>Date of Disbursement</b>
Mailing Address PO Box 15245	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-0245	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind: <div></div> Candidate Name Conservative Victory Fund <div>Category/Type</div>	<div>407.70</div>
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) ..... ►	<div>1273.60</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►	<div></div>

# **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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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Conservative Victory Fund	<b>Transaction ID:</b> B1C457222AA144B7DA7A <b>Date of Disbursement</b>
Mailing Address PO Box 15245	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-0245	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement In-kind: <div></div> Candidate Name Conservative Victory Fund <div>Category/Type</div>	<div>401.65</div>
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>B.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> B259A57FA5DD0497EBE4 <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing <div></div> Candidate Name <div>Category/Type</div>	<div>15543.11</div>
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>C.</b> Full Name (Last, First, Middle Initial) Ty Comp	<b>Transaction ID:</b> BD0571BE8A88948C4ABC <b>Date of Disbursement</b>
Mailing Address 329 E Lake	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Typsetting <div></div> Candidate Name <div>Category/Type</div>	<div>60.00</div>
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:	

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

16004.76

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) McGahn & Associates PLLC	<b>Transaction ID:</b> B14D236955C5644C0AD2 <b>Date of Disbursement</b>
Mailing Address 509 7th St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20004	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Legal Consulting	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) S.J. Smith Co	<b>Transaction ID:</b> BADBE9A31C4A74A0AB1F <b>Date of Disbursement</b>
Mailing Address 3707 W River Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City DAVENPORT State IA Zip Code 52802	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Helium Rental	<div>37.31</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> B80389468CA7F4B709E2 <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Rent	<div>3165.48</div>
Candidate Name	<div>Category/Type</div>
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) .....

5202.79

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> BDA2E9EDC074140B796B <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Utilities	<div>645.69</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> B96563EF96664454890A <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Rent	<div>3060.48</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) North Point Storage	<b>Transaction ID:</b> BE631AF05617B43BF83F <b>Date of Disbursement</b>
Mailing Address 9000 N. Locust Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Administrative/Salary/Overhead Expenses	<div>420.00</div>
Candidate Name	<div>Category/Type</div>
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) .....

4126.17

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B464D050B960244619B2 <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Strategix Planning Consultant Fee Candidate Name	<div> <div>6500.00</div> <div>Category/Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Aventum LLC	<b>Transaction ID:</b> BFECF855C62894365868 <b>Date of Disbursement</b>
Mailing Address 1155 21st St, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising consultant Fees Candidate Name	<div> <div>10100.48</div> <div>Category/Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Ikon	<b>Transaction ID:</b> B9E494D4C37E1435FADA <b>Date of Disbursement</b>
Mailing Address PO Box 650016	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental Candidate Name	<div> <div>75.00</div> <div>Category/Type</div> </div>
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) .....

**16675.48**

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Wilson Grand	<b>Transaction ID:</b> BBC99B3F9D2654DD7897 <b>Date of Disbursement</b>
Mailing Address 429 North St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-2317	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Advertising Expenses Candidate Name	<div>15000.00</div>
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>B.</b> Full Name (Last, First, Middle Initial) Political Compliance Services	<b>Transaction ID:</b> B11BCB8D8712840B9B98 <b>Date of Disbursement</b>
Mailing Address PO Box 373	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 4 / 2 0 0 8</div> </div>
City Fairfax Station State VA Zip Code 22039	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compliance and Database Fees Candidate Name	<div>3000.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) Speedy Printing	<b>Transaction ID:</b> B4BC1A224B5DD4A79B55 <b>Date of Disbursement</b>
Mailing Address 3316 N Prospect	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 4 / 2 0 0 8</div> </div>
City PEORIA State IL Zip Code 61603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing Candidate Name	<div>1590.00</div>
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) .....

19590.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Public Opinion Strategies	<b>Transaction ID:</b> B8DB520B59AD44D9885D <b>Date of Disbursement</b>
Mailing Address 214 N Fayette St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314 Purpose of Disbursement Survey Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>25000.00</div>
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>B.</b> Full Name (Last, First, Middle Initial) Ty Comp	<b>Transaction ID:</b> B71B0588726BC4CE1BC2 <b>Date of Disbursement</b>
Mailing Address 329 E Lake	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614 Purpose of Disbursement Typsetting Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>20.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) Airgas	<b>Transaction ID:</b> BA85DA291D637483BA55 <b>Date of Disbursement</b>
Mailing Address 2706 SW Adams St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61602-1908 Purpose of Disbursement Helium Rental Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>12.71</div>
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) .....	<div>25032.71</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Scott Siegrist	<b>Transaction ID:</b> B363DFEFB8CDB4038A92 <b>Date of Disbursement</b>
Mailing Address 6516 N. Ridgefield Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-2431	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Maintenance	<div>35.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> BA91B521730E641049A6 <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Reimbursement	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Comcast	<b>Transaction ID:</b> B056CEF4539554915933 <b>Date of Disbursement</b>
Mailing Address 3116 North Dries Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1278	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet	<div>391.66</div>
Candidate Name	<div>Category/Type</div>
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) .....

926.66

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.** Full Name (Last, First, Middle Initial)  
Macon County Republican Central Committee

Mailing Address PO Box 795

City Decatur State IL Zip Code 62525-0795

Purpose of Disbursement  
Advertising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE33FAF26BBC4435C82E

Date of Disbursement

/   /

Amount of Each Disbursement this Period

475.00

**B.** Full Name (Last, First, Middle Initial)  
Ty Comp

Mailing Address 329 E Lake

City Peoria State IL Zip Code 61614

Purpose of Disbursement  
Typesetting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B01B223B961324E80B0C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.00

**C.** Full Name (Last, First, Middle Initial)  
AT&T

Mailing Address PO Box 8103

City Aurora State IL Zip Code 60507

Purpose of Disbursement  
Phone Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BB646CD64E9DB4EC3A2C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

34.80

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

574.80

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ikon	<b>Transaction ID:</b> BB97CE8C85CEB4286A51 <b>Date of Disbursement</b>
Mailing Address PO Box 650016	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div>474.96</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Speedy Printing	<b>Transaction ID:</b> BC2C2B6134BB5416CB31 <b>Date of Disbursement</b>
Mailing Address 3316 N Prospect	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City PEORIA State IL Zip Code 61603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div>150.00</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Health Alliance	<b>Transaction ID:</b> B37331B2DBC84400FBDB <b>Date of Disbursement</b>
Mailing Address 301 S Vine	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Urbana State IL Zip Code 61801-3347	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Insurance	<div>625.00</div>
Candidate Name	<div>Category/Type</div>
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) .....

1249.96

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



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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> BBE7BD1EE8952434CA51 <b>Date of Disbursement</b>
Mailing Address 255 Parkshore Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Folsom State CA Zip Code 95630-4716 Purpose of Disbursement Phone Service Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>421.16</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mr. Aaron Jon Schock	<b>Transaction ID:</b> B6FF0E7855CB04BD0B62 <b>Date of Disbursement</b>
Mailing Address 1040 East Melbourne Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61603-2026 Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name Mr. Aaron Jon Schock	<b>Amount of Each Disbursement this Period</b> <div>400.00</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Janice M Knapp	<b>Transaction ID:</b> BDEC14FB6756A4CD8914 <b>Date of Disbursement</b>
Mailing Address 6021 N. Imperial Dr Apt. 130	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3964 Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>83.59</div>
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) .....	<div>904.75</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) New Junction Ventures</p> <p>Mailing Address 5901 N. Prospect Rd.</p> <p>City Peoria State IL Zip Code 61614</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BC6D23F45FC2D47C9A9E</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>263.27</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Illinois Republican Party</p> <p>Mailing Address 205 W Randolph St, Ste 1245</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement Registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B50875DBED2F64E619FF</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>200.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ameren Cilco</p> <p>Mailing Address P.O. Box 66826</p> <p>City Saint Louis State MO Zip Code 63166-6826</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B4CC4ECDBB38A4465B6E</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>161.53</div> </p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>624.80</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> BFA8FA7132B68466995C <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consulting Fee Candidate Name	<div> <div>6500.00</div> <div>Category/Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Aventum LLC	<b>Transaction ID:</b> B2C597FEF7B384F8C8DA <b>Date of Disbursement</b>
Mailing Address 1155 21st St, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising Consultant Fee Candidate Name	<div> <div>3763.36</div> <div>Category/Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> B83E1D8CB61F14C78A31 <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Maintenance Candidate Name	<div> <div>110.00</div> <div>Category/Type</div> </div>
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) .....

**10373.36**

**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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> B5D86B86BFE374F1D917 <b>Date of Disbursement</b>
Mailing Address PO Box 8103	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City Aurora State IL Zip Code 60507	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone Services Candidate Name <div>Category/Type</div>	<div>261.52</div>
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>B.</b> Full Name (Last, First, Middle Initial) EDonations	<b>Transaction ID:</b> B2B5D86EA95BC45A18E0 <b>Date of Disbursement</b>
Mailing Address 118 N St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 9 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-3110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Online Credit Card Fee Candidate Name <div>Category/Type</div>	<div>4.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) EDonations	<b>Transaction ID:</b> B64E9B036FC1243E3A07 <b>Date of Disbursement</b>
Mailing Address 118 N St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 9 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-3110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Online Credit Card Fee Candidate Name <div>Category/Type</div>	<div>742.60</div>
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) .....

1008.12

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) EDonations	<b>Transaction ID:</b> BBBCE69171C424B6A8A5 <b>Date of Disbursement</b>
Mailing Address 118 N St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-3110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Online Credit Card Fee Candidate Name <div>Category/Type</div>	<div>243.40</div>
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>B.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> B519EF5D1E6044B7DAAC <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Rent Candidate Name <div>Category/Type</div>	<div>3120.16</div>
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>C.</b> Full Name (Last, First, Middle Initial) Speedy Printing	<b>Transaction ID:</b> B8FF6BA6FDEC64F05BEB <b>Date of Disbursement</b>
Mailing Address 3316 N Prospect	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City PEORIA State IL Zip Code 61603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing Candidate Name <div>Category/Type</div>	<div>105.00</div>
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:	

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

**3468.56**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) McGahn & Associates PLLC	<b>Transaction ID:</b> B8CC45C987E7F4BF6983 <b>Date of Disbursement</b>
Mailing Address 509 7th St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20004	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Monthly Retainer	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Sangamon County Republican Central Committee	<b>Transaction ID:</b> BBD8170811ED2484EA52 <b>Date of Disbursement</b>
Mailing Address 1132 Sangamon Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lease	<div>500.00</div>
Candidate Name Sangamon County Republican Central Committee	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> B7FE0AD3029554120A57 <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div>276.50</div>
Candidate Name	<div>Category/Type</div>
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) .....

2776.50

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Monier's</p> <p>Mailing Address 5901 N. Prospect Rd. Suite 15</p> <p>City Peoria State IL Zip Code 61614-4337</p> <p>Purpose of Disbursement Floral arrangement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B56458AD1B2FB4D618E9</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>226.18</div> </p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) S.J. Smith Co</p> <p>Mailing Address 3707 W River Dr</p> <p>City DAVENPORT State IA Zip Code 52802</p> <p>Purpose of Disbursement Helium Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B55A89042D383475187E</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>52.08</div> </p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Wilson Grand</p> <p>Mailing Address 429 North St Asaph St</p> <p>City Alexandria State VA Zip Code 22314-2317</p> <p>Purpose of Disbursement Media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B042A2C5FAB7B4AA7929</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>5000.00</div> </p> <p>Category/ Type</p>

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

**5278.26**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ikon	<b>Transaction ID:</b> BA89C063806674A989E8 <b>Date of Disbursement</b>
Mailing Address PO Box 650016	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div>75.00</div>
Candidate Name	<div>Category/ Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> BEF161EF78275471BAEC <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Service Fee	<div>152.90</div>
Candidate Name	<div>Category/ Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Political Compliance Services	<b>Transaction ID:</b> BAC2AD7CC24EF428C8CC <b>Date of Disbursement</b>
Mailing Address PO Box 373	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Fairfax Station State VA Zip Code 22039	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Compliance	<div>1500.00</div>
Candidate Name	<div>Category/ Type</div>
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) .....	<div>1727.90</div>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Airgas	<b>Transaction ID:</b> BED3A30F83C254335B03 <b>Date of Disbursement</b>
Mailing Address 2706 SW Adams St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61602-1908	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Helium Rental Candidate Name <div>Category/Type</div>	<div>18.15</div>
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>B.</b> Full Name (Last, First, Middle Initial) Technicraft	<b>Transaction ID:</b> BEBEDED1FF7A44135BA4 <b>Date of Disbursement</b>
Mailing Address 419 Elm St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61605	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Typesetting Candidate Name <div>Category/Type</div>	<div>180.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) S.J. Smith Co	<b>Transaction ID:</b> B0F48B5DB83674BA3A7D <b>Date of Disbursement</b>
Mailing Address 3707 W River Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City DAVENPORT State IA Zip Code 52802	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Helium Rental Candidate Name <div>Category/Type</div>	<div>27.59</div>
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) .....

**225.74**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Comcast	<b>Transaction ID:</b> BC4F96F2AEE8743718D2 <b>Date of Disbursement</b>
Mailing Address 3116 North Dries Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1278	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet	<div>192.37</div>
Candidate Name	<div>Category/ Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) EDonations	<b>Transaction ID:</b> B6EC3517934EB452E901 <b>Date of Disbursement</b>
Mailing Address 118 N St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 3 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-3110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Online Credit Card Fee	<div>4.00</div>
Candidate Name	<div>Category/ Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Creative Logic	<b>Transaction ID:</b> BA9E1512EB15A4967BCF <b>Date of Disbursement</b>
Mailing Address 417 SW Washington St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61602-1514	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Website	<div>1850.00</div>
Candidate Name	<div>Category/ Type</div>
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) .....

2046.37

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peoria Blind Factory	<b>Transaction ID:</b> BFDD99BFEEA3340989ED <b>Date of Disbursement</b>
Mailing Address 1328 N University	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies	<div> <div></div> <div>330.48</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Speedy Printing	<b>Transaction ID:</b> B3A4EC8FF06AE4B86B60 <b>Date of Disbursement</b>
Mailing Address 3316 N Prospect	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City PEORIA State IL Zip Code 61603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div> <div></div> <div>170.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> BA5AF1A0D79F1497E86C <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Utilities	<div> <div></div> <div>245.71</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
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) .....

**746.19**

**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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ikon	<b>Transaction ID:</b> B74723B88471B4C4892A <b>Date of Disbursement</b>
Mailing Address PO Box 650016	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div> <div></div> <div>474.96</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Wilson Grand	<b>Transaction ID:</b> B2E40EA07D9F041BFA5C <b>Date of Disbursement</b>
Mailing Address 429 North St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-2317	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consulting Fee	<div> <div></div> <div>2000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> BB516C40EEA0A4104AA2 <b>Date of Disbursement</b>
Mailing Address 255 Parkshore Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Folsom State CA Zip Code 95630-4716	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone	<div> <div></div> <div>441.90</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) .....

**2916.86**

**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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Health Alliance</p> <p>Mailing Address 301 S Vine</p> <p>City Urbana State IL Zip Code 61801-3347</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BCAD7F6C0213C454491D</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="625.00"/></p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CEFCU Citizens Equity Federal Credit Union</p> <p>Mailing Address P.O. Box 1715</p> <p>City Peoria State IL Zip Code 61656-1715</p> <p>Purpose of Disbursement Checks</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B7BA1173A89974100B54</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.60"/></p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Varsity Publications</p> <p>Mailing Address PO Box 825</p> <p>City Pekin State IL Zip Code 61555</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BDF99B8890DAE49768AE</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="220.00"/></p> <p>Category/Type</p>

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

**861.60**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Aventum LLC

Mailing Address 1155 21st St, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Fundraising Consultant Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2AE49A63E1234A0583A

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4708.41

**B.**

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

Mailing Address PO Box 8103

City Aurora State IL Zip Code 60507

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B1BE7D6A3387C4067B5D

Date of Disbursement

/   /

Amount of Each Disbursement this Period

262.10

**C.**

Full Name (Last, First, Middle Initial)  
Ameren Cilco

Mailing Address P.O. Box 66826

City Saint Louis State MO Zip Code 63166-6826

Purpose of Disbursement  
Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B797F5562DD4C4AAB96A

Date of Disbursement

/   /

Amount of Each Disbursement this Period

228.28

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

5198.79

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Technicraft	<b>Transaction ID:</b> B850594B63C0C4359843 <b>Date of Disbursement</b>
Mailing Address 419 Elm St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61605	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Typesetting	<div> <div></div> <div>30.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> B5C44733E724741A78EF <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div> <div></div> <div>271.15</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Creative Logic	<b>Transaction ID:</b> BADACABE2D7C64EEB8F1 <b>Date of Disbursement</b>
Mailing Address 417 SW Washington St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61602-1514	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Website	<div> <div></div> <div>1000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) .....

**1301.15**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> BB704BAE5C710436D92C <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	Amount of Each Disbursement this Period
Purpose of Disbursement Consulting Fee Candidate Name <div>Category/Type</div>	<div>6500.00</div>
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>B.</b> Full Name (Last, First, Middle Initial) EDonations	<b>Transaction ID:</b> BBED93A94708446ABA54 <b>Date of Disbursement</b>
Mailing Address 118 N St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 1 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-3110	Amount of Each Disbursement this Period
Purpose of Disbursement Online Credit Card Fee Candidate Name <div>Category/Type</div>	<div>75.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) New Junction Ventures	<b>Transaction ID:</b> B87341FB544E34A1588E <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	Amount of Each Disbursement this Period
Purpose of Disbursement RENT Candidate Name <div>Category/Type</div>	<div>3105.80</div>
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) .....

**9680.80**

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



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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) McGahn &amp; Associates PLLC</p> <p>Mailing Address 509 7th St NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement LEGAL CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1BBFEE564AEF487E846</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>2000.00</div> </p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) S.J. Smith Co</p> <p>Mailing Address 3707 W River Dr</p> <p>City DAVENPORT State IA Zip Code 52802</p> <p>Purpose of Disbursement Helium Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3F792A17DAF14E8285D</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>33.12</div> </p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ikon</p> <p>Mailing Address PO Box 650016</p> <p>City Dallas State TX Zip Code 75265</p> <p>Purpose of Disbursement EQUIPMENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BDA4DCA39F0244DFFB37</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>590.24</div> </p> <p>Category/ Type</p>

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

**2623.36**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Price Mailing Address PO Box 29	<b>Transaction ID:</b> BE1E4F267B647476AB97 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City State Zip Code Glasford IL 61533-0029 Purpose of Disbursement Photography 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>Amount of Each Disbursement this Period</b> <div>401.25</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Political Compliance Services Mailing Address PO Box 373 City State Zip Code Fairfax Station VA 22039 Purpose of Disbursement Compliance 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>Transaction ID:</b> B69F571295B5D4308917 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>71.20</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Airgas Mailing Address 2706 SW Adams St City State Zip Code Peoria IL 61602-1908 Purpose of Disbursement Helium 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) ▼	<b>Transaction ID:</b> B5D6932AB74844E319C7 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>18.76</div> <div>Category/Type</div>

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

**491.21**

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B369BF7B1022D4AC8AD2 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PAYROLL SERVICES	<div> <div></div> <div>134.02</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> BE521433CB8864E0B9B3 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage	<div> <div></div> <div>84.00</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Comcast	<b>Transaction ID:</b> B846AF4188CF241ED98B <b>Date of Disbursement</b>
Mailing Address 3116 North Dries Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1278	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Internet	<div> <div></div> <div>192.37</div> </div>
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) ▼

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

**410.39**

**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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Scott Siegrist	<b>Transaction ID:</b> B25775337C1B84E0790A <b>Date of Disbursement</b>
Mailing Address 6516 N. Ridgefield Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-2431	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Maintenance	<div>88.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B83A921BD522442D7938 <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Reimbursement	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Junction City Art Fair	<b>Transaction ID:</b> B032E8B1E75274E61A6D <b>Date of Disbursement</b>
Mailing Address 5901 N. Prospect Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-4358	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Advertising	<div>2500.00</div>
Candidate Name	<div>Category/Type</div>
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) .....

3088.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Wilson Grand	<b>Transaction ID:</b> B36D9DA41DD5C4878995 <b>Date of Disbursement</b>
Mailing Address 429 North St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-2317	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consulting	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Ikon	<b>Transaction ID:</b> B851CDEC63B974AECB63 <b>Date of Disbursement</b>
Mailing Address PO Box 650016	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Equipment Rental	<div>474.96</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Country Insurance	<b>Transaction ID:</b> BDED03A17FB774B2195B <b>Date of Disbursement</b>
Mailing Address P.O. Box 2100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 8</div> </div>
City Bloomington State IL Zip Code 61702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Insurance	<div>206.05</div>
Candidate Name	<div>Category/Type</div>
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) .....

**2681.01**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Health Alliance</p> <p>Mailing Address 301 S Vine</p> <p>City Urbana State IL Zip Code 61801-3347</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3563F7D3C1DB40BBA3C</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="625.00"/></p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) New Junction Ventures</p> <p>Mailing Address 5901 N. Prospect Rd.</p> <p>City Peoria State IL Zip Code 61614</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B09A04FB311A34835AF9</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="99.99"/></p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) EDonations</p> <p>Mailing Address 118 N St Asaph St</p> <p>City Alexandria State VA Zip Code 22314-3110</p> <p>Purpose of Disbursement Online Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA317B8537AA64D18975</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <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="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.00"/></p> <p>Category/Type</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <input type="text" value="728.99"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <input type="text"/></p>	

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 150 Sawgrass Dr	<b>Transaction ID:</b> B06E188AB1D26411EB5E <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648 Purpose of Disbursement Payroll (SEE MEMO) 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>Amount of Each Disbursement this Period</b> <div>10853.44</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Joan Perisin Mailing Address 113 W Coventry Lane City Peoria State IL Zip Code 61614-2107 Purpose of Disbursement Payroll 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>Transaction ID:</b> B4188434E29124F0783B <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>776.00</div> <div>Category/Type</div> <p><b>[MEMO ITEM]</b></p>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger Mailing Address 2304 N. Lehman Rd City Peoria State IL Zip Code 61604-3036 Purpose of Disbursement Payroll 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>Transaction ID:</b> B6EBBB4B93DF94EDBA12 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1210.03</div> <div>Category/Type</div> <p><b>[MEMO ITEM]</b></p>

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

10853.44

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B0D8CE10E5BD341BEB05 <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Bourbonnais IL 60914-1827	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1499.96</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Sara A. Owens	<b>Transaction ID:</b> B0FDBF14717EE46318C0 <b>Date of Disbursement</b>
Mailing Address 317 E. Morningside Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Peoria IL 61614-2174	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>2567.41</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B1359FDA2CEC346F9B5B <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Peoria IL 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>961.87</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

0.00

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



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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Andy Meister	<b>Transaction ID:</b> BA9DD109F20B14829B2A <b>Date of Disbursement</b>
Mailing Address 18 Prairie Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City Mount Pulaski State IL Zip Code 62548-6061	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>575.25</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> BA1A5075052FB4102AE8 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll taxes	<div>3262.92</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B8879FBD9A6A4422DA0B <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>154.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

154.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> BF95977FCF8CB4ECEA8C <b>Date of Disbursement</b>
Mailing Address 801 West Lake St	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 22 / 2008</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies	<div>110.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B41C14659A1B241AEA5D <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 22 / 2008</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>44.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B2E8B87EA62B2454CA3F <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>05 / 12 / 2008</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>1260.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>1260.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Expedia	<b>Transaction ID:</b> B742452247EBB4580846 <b>Date of Disbursement</b>
Mailing Address 3150 139th Ave SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Bellevue State WA Zip Code 98005-4046	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>760.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> BFDF71DD74DE545E7BAB <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Reimbursement	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B93D00F51BD644F6E8A7 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll (SEE MEMO)	<div>6010.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

6010.89

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B8FE8C13803EC454E909 <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>961.87</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BF0120EFD05E40188F4 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1650.35</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> BFF9F0091810D461E8F3 <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Bourbonnais State IL Zip Code 60914-1827	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1499.96</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>

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

**0.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B6EE0CCDDCE3B4EBE905 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll taxes	<div>1898.71</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> BD83D6A19D38340CD96C <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>680.37</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Office Max	<b>Transaction ID:</b> B3E77C7595ABF4F0EB99 <b>Date of Disbursement</b>
Mailing Address 4100 Willow Knolls Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies	<div>680.37</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

680.37

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Janice M Knapp

Mailing Address 6021 N. Imperial Dr  
Apt. 130

City Peoria State IL Zip Code 61614-3964

Purpose of Disbursement  
Reimbursement (SEE MEMO)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BF5E3E77D314A438CA70

Date of Disbursement

/   /

Amount of Each Disbursement this Period

664.66

**B.**

Full Name (Last, First, Middle Initial)

US Postmaster

Mailing Address 6310 N University St

City Peoria State IL Zip Code 61614-3487

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B61A4BFD330FC43E1A58

Date of Disbursement

/   /

Amount of Each Disbursement this Period

647.71

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Kroger

Mailing Address 9219 N Lindberg

City Peoria State IL Zip Code 61615-1425

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BBE79E664DCC3434BABD

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.95

**[MEMO ITEM]**

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

664.66

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> BAB0D6BED129C4B1CB89 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648 Purpose of Disbursement Payroll (see memo) Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>14327.42</div>
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>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> BB9884076D6F9430BAD4 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648 Purpose of Disbursement Payroll Taxes Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>4760.55</div>
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B7836ADFF71044F94AFF <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831 Purpose of Disbursement Payroll Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>961.87</div>
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) .....

14327.42

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Andy Meister	<b>Transaction ID:</b> B36D1A2F241E04610B1F <b>Date of Disbursement</b>
Mailing Address 18 Prairie Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Mount Pulaski State IL Zip Code 62548-6061	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>619.86</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B86BE743BE9B249E19A4 <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Bourbonnais State IL Zip Code 60914-1827	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1499.96</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Sara A. Owens	<b>Transaction ID:</b> B089294352903456CA82 <b>Date of Disbursement</b>
Mailing Address 317 E. Morningside Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-2174	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>4151.71</div>
Candidate Name	<div>Category/Type</div>
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>[MEMO ITEM]</b>

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

0.00

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



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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Wade A. Dooley	<b>Transaction ID:</b> B8A6D895CC1B14E55BD4 <b>Date of Disbursement</b>
Mailing Address 4021 S. Sheffield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Bartonville State IL Zip Code 61607-2197	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>853.32</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BFED4FD1D82734E8E811 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1480.15</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B43023ED0DB9B42049D4 <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>447.49</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

**447.49**

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) FedEx Kinko's	<b>Transaction ID:</b> B62BE3AD6E2D1472E9E1 <b>Date of Disbursement</b>
Mailing Address 3465 N. University St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1322	<b>Amount of Each Disbursement this Period</b> <div>15.25</div>
Purpose of Disbursement Printing	<div></div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> B884B99D1D3E741FDA19 <b>Date of Disbursement</b>
Mailing Address 801 West Lake St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b> <div>432.24</div>
Purpose of Disbursement Office Supplies	<div></div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CitiCards	<b>Transaction ID:</b> BD5AD352E11DD4E0A88F <b>Date of Disbursement</b>
Mailing Address 1500 Boltonfield St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City Columbus State OH Zip Code 43228	<b>Amount of Each Disbursement this Period</b> <div>3198.24</div>
Purpose of Disbursement Credit Card Payment (SEE MEMO)	<div></div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

**3198.24**

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Dealer's Com Autobody	<b>Transaction ID:</b> B74B5F2EDFD914B47AEC <b>Date of Disbursement</b>
Mailing Address 4001 Jackson	<div> <div>05</div> <div>05</div> <div>2008</div> </div>
City Morton State IL Zip Code 61550-1067	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Maintenance Candidate Name <div>Category/Type</div>	<div>764.13</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Lighthouse Automotive	<b>Transaction ID:</b> B788BFCB8C7F141E5AA1 <b>Date of Disbursement</b>
Mailing Address 100 W Jackson	<div> <div>05</div> <div>05</div> <div>2008</div> </div>
City Morton State IL Zip Code 61550-1664	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Maintenance Candidate Name <div>Category/Type</div>	<div>343.12</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club	<b>Transaction ID:</b> B4B3CE32D62064C70956 <b>Date of Disbursement</b>
Mailing Address 300 First St SE	<div> <div>05</div> <div>05</div> <div>2008</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering Candidate Name <div>Category/Type</div>	<div>1950.30</div>
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>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> BAEA61D9484684B16B2E <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div> <div></div> <div>10.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> B58986810C4AE4C9C920 <b>Date of Disbursement</b>
Mailing Address PO Box 650448	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265-0448	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CREDIT CARD: SEE BELOW	<div> <div></div> <div>4407.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Shell	<b>Transaction ID:</b> BB021AAD3E40043CEBFC <b>Date of Disbursement</b>
Mailing Address 3300 E. Clear Lake	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies	<div> <div></div> <div>44.79</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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:	

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

**4417.00**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Shell	<b>Transaction ID:</b> B234C32273C1E43BCA32 <b>Date of Disbursement</b>
Mailing Address 3300 E. Clear Lake	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies Candidate Name	<div> <div>45.05</div> <div>[MEMO ITEM]</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> BC03E4CACAD05460DBF5 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POSTAGE Candidate Name	<div> <div>24.90</div> <div>[MEMO ITEM]</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) Seven	<b>Transaction ID:</b> B7096B6D9C60B42BD89A <b>Date of Disbursement</b>
Mailing Address 4609 Prospect Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City PEORIA HEIGHTS State IL Zip Code 61616	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meals Candidate Name	<div> <div>98.90</div> <div>[MEMO ITEM]</div> </div>
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) .....

0.00

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Marathon</p> <p>Mailing Address 6025 N. University</p> <p>City Peoria State IL Zip Code 61614</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B7DADA484EBCB460FA61</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>73.06</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Shell</p> <p>Mailing Address 3300 E. Clear Lake</p> <p>City Springfield State IL Zip Code 62702</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BAF3E710978EE468892D</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>5.42</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Shell</p> <p>Mailing Address 3300 E. Clear Lake</p> <p>City Springfield State IL Zip Code 62702</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2E2820D9A6304A1982E</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>38.80</div> </p> <p><b>[MEMO ITEM]</b></p>

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

**0.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Shell Mailing Address 3300 E. Clear Lake	<b>Transaction ID:</b> B68B69F9820A843F99B2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62702 Purpose of Disbursement Auto 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>72.12</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Shell Mailing Address 3300 E. Clear Lake City Springfield State IL Zip Code 62702 Purpose of Disbursement Auto 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) ▼	<b>Transaction ID:</b> BAED3D93B2DD84516BDF <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>57.73</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Shell Mailing Address 3300 E. Clear Lake City Springfield State IL Zip Code 62702 Purpose of Disbursement Auto 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) ▼	<b>Transaction ID:</b> B174C109A64864293B17 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>77.04</div> <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> B4A554B1AAE1B41F280F <b>Date of Disbursement</b>
Mailing Address 205 Pennsylvania Ave. SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-1164	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Database	<div> <div></div> <div>2500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Circle K	<b>Transaction ID:</b> B0ED37092108A473EA6A <b>Date of Disbursement</b>
Mailing Address 319 N Main	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Morton State IL Zip Code 61550	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies	<div> <div></div> <div>64.23</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Shell	<b>Transaction ID:</b> BFC62C5E5A1644476880 <b>Date of Disbursement</b>
Mailing Address 3300 E. Clear Lake	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City Springfield State IL Zip Code 62702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies	<div> <div></div> <div>43.42</div> </div>
Candidate Name	<div> <div></div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div> <div></div> <div>0.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> <div></div> </div>



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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B6E872C7F3DF14E6D818 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement reimbursement (SEE MEMO)	<div>198.56</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B1914B95581604B82850 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage	<div>82.00</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) FedEx Kinko's	<b>Transaction ID:</b> B28CEC1DF2F964F398DE <b>Date of Disbursement</b>
Mailing Address 3465 N. University St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1322	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div>51.56</div>
Candidate Name	<div>Category/ Type</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>[MEMO ITEM]</b>

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

198.56

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B577BF4F5DCA5415A8AB <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>117.48</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) FedEx Kinko's	<b>Transaction ID:</b> B49CC589CFF80477A848 <b>Date of Disbursement</b>
Mailing Address 3465 N. University St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1322	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div>6.07</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> BC4FCF5EF1288458CB19 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage	<div>4.66</div>
Candidate Name	<div>Category/Type</div>
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) .....

117.48

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B35974AFFEE0C42E5A66 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	Amount of Each Disbursement this Period
Purpose of Disbursement Postage Candidate Name <div>Category/Type</div>	<div>81.00</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B6421BBF8AC9C4B03818 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll (SEE MEMO) Candidate Name <div>Category/Type</div>	<div>10624.56</div>
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>C.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B0903A08AC6124CD993D <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll taxes Candidate Name <div>Category/Type</div>	<div>3258.55</div>
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>[MEMO ITEM]</b>

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

**10624.56**

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Andy Meister	<b>Transaction ID:</b> B87FC7180D46E4AA18C3 <b>Date of Disbursement</b>
Mailing Address 18 Prairie Ln	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Mount Pulaski State IL Zip Code 62548-6061	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>500.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Sara A. Owens	<b>Transaction ID:</b> BB48483EAE268422CAF1 <b>Date of Disbursement</b>
Mailing Address 317 E. Morningside Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-2174	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>2567.41</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BE6E49F68A0FF405A82C <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1524.55</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B6B7247FACDA24DEBAEB <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>497.19</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B8D1E0A81F4994F6F90F <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Bourbonnais State IL Zip Code 60914-1827	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1499.96</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Joan Perisin	<b>Transaction ID:</b> B0BC43E64F1C1486CA2D <b>Date of Disbursement</b>
Mailing Address 113 W Coventry Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-2107	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>776.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

0.00

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

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

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

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> BA1137F42AB5D4372A2E <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Debt Repayment Candidate Name <div>Category/Type</div>	<div>2149.17</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B4DB5472E05704698AF4 <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Administrative Expense Reimbursement (see Candidate Name <div>Category/Type</div>	<div>492.00</div>
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>C.</b> Full Name (Last, First, Middle Initial) Parti Line International	<b>Transaction ID:</b> BC05D63B0E9BB4EBFB90 <b>Date of Disbursement</b>
Mailing Address 706 Royal Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City New Orleans State LA Zip Code 70116	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Administrative Expense Reimbursement (see Candidate Name <div>Category/Type</div>	<div>492.00</div>
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>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	<div>2641.17</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Wade A. Dooley	<b>Transaction ID:</b> B2F695553E1B04A24B91 <b>Date of Disbursement</b>																				
Mailing Address 4021 S. Sheffield	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	0	8												
City Bartonville State IL Zip Code 61607-2197	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name	<table border="1"> <tr> <td colspan="10">41.00</td> </tr> </table>	41.00																			
41.00																					
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>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B45900E2D4E064A2FBE3 <b>Date of Disbursement</b>																				
Mailing Address 6310 N University St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	0	8												
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Postage Candidate Name	<table border="1"> <tr> <td colspan="10">41.00</td> </tr> </table>	41.00																			
41.00																					
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B3C1B4DBE382C44BF95F <b>Date of Disbursement</b>																				
Mailing Address 2304 N. Lehman Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name	<table border="1"> <tr> <td colspan="10">238.74</td> </tr> </table>	238.74																			
238.74																					
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) .....

279.74

**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:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B6CD6259531F64BE19C0 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b> <div>24.90</div>
Purpose of Disbursement POSTAGE	<div></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B07224A2070C64D3DBC3 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b> <div>23.20</div>
Purpose of Disbursement POSTAGE	<div></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B56AED665339B4BBA98F <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b> <div>138.10</div>
Purpose of Disbursement POSTAGE	<div></div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div></div>



# **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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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) FedEx Kinko's	<b>Transaction ID:</b> BD89E7D35EC21471BA1A <b>Date of Disbursement</b>
Mailing Address 3465 N. University St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1322	<b>Amount of Each Disbursement this Period</b> <div>42.92</div>
Purpose of Disbursement PRINTING	<div></div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> BC6B16A8B8599461BA1C <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b> <div>1705.00</div>
Purpose of Disbursement Debt Repayment	<div></div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B7A7D7FD23AF147B4895 <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b> <div>360.00</div>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div></div>
Candidate Name	<div>Category/Type</div>
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) .....

**2065.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Illinois Issues</p> <p>Mailing Address One University Plaza HRB 10</p> <p>City Springfield State IL Zip Code 62703</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5B7EB3ED283D443BA4A  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>360.00</div></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman</p> <p>Mailing Address 274 West Marsile</p> <p>City Bourbonnais State IL Zip Code 60914-1827</p> <p>Purpose of Disbursement Reimbursement (SEE MEMO)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B85BE6A7A13084221B5A  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>3213.93</div></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sheridan Crystal City Hotel</p> <p>Mailing Address 1800 Jefferson Davis Highway</p> <p>City Arlington State VA Zip Code 22202-3506</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B26DD635BD88C4DCE919  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>1178.24</div></p> <p><b>[MEMO ITEM]</b></p>

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

**3213.93**

**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  
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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Expedia Mailing Address 3150 139th Ave SE	<b>Transaction ID:</b> B7F21F37E233C4BD7A96 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Bellevue State WA Zip Code 98005-4046 Purpose of Disbursement Travel 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>Amount of Each Disbursement this Period</b> <div>537.00</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman Mailing Address 274 West Marsile City Bourbonnais State IL Zip Code 60914-1827 Purpose of Disbursement Travel 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>Transaction ID:</b> BF7434AA09CB9481F86F <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>90.20</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman Mailing Address 274 West Marsile City Bourbonnais State IL Zip Code 60914-1827 Purpose of Disbursement Travel 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>Transaction ID:</b> B51E3D53EAEF446FBACF <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>24.20</div> <b>[MEMO ITEM]</b>

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

0.00

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

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

Use separate schedule(s)  
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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sheridan Crystal City Hotel	<b>Transaction ID:</b> B1C7D5762900F43B3A00 <b>Date of Disbursement</b>
Mailing Address 1800 Jefferson Davis Highway	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22202-3506	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>1184.39</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee	<b>Transaction ID:</b> BE58281C7B66141C2AD5 <b>Date of Disbursement</b>
Mailing Address 320 First St, SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Registration Fee	<div>25.00</div>
Candidate Name National Republican Congressional Committee	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> BE499B56E7F4E423C88D <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>1755.98</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

1755.98

**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:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Air Lines</p> <p>Mailing Address Atlanta Airport</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA655D3F5D06E4FC2836</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>745.98</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Campaign and Elections</p> <p>Mailing Address 666 Plainsboro Rd, Ste 300</p> <p>City Plainsboro State NJ Zip Code 08536-3000</p> <p>Purpose of Disbursement Campaign Training</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA8898689D1894ED0836</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>1010.00</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Steven Shearer</p> <p>Mailing Address 1501 W. Coneflower Dr # 2216</p> <p>City Peoria State IL Zip Code 61615-7468</p> <p>Purpose of Disbursement REIMBURSEMENT (SEE MEMO)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B685D72E26A864FAC85F</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>16.21</div> </p>

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

**16.21**

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

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BE08002DA1518473BBE7 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name	<div> <div>138.88</div> <div>Category/Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> BFD9DF0BCEB9C4B7895D <b>Date of Disbursement</b>
Mailing Address 801 West Lake St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>83.83</div> <div>Category/Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> BAF3219431A7249C3935 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage Candidate Name	<div> <div>55.05</div> <div>Category/Type</div> </div>
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) .....

138.88

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Wade A. Dooley

Mailing Address 4021 S. Sheffield

City  
Bartonville

State  
IL

Zip Code  
61607-2197

Purpose of Disbursement  
Reimbursement (SEE MEMO)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B8207A08A7C1C4D6D868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.00

**B.**

Full Name (Last, First, Middle Initial)

US Postmaster

Mailing Address 6310 N University St

City  
Peoria

State  
IL

Zip Code  
61614-3487

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2544A8B8673E4571AA3

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Mr. Steven Shearer

Mailing Address 1501 W. Coneflower Dr  
 # 2216

City  
Peoria

State  
IL

Zip Code  
61615-7468

Purpose of Disbursement  
Reimbursement (SEE MEMO)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BBA2BE369ADDD48EBB4C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

615.28

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

656.28

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) J W Marriott	<b>Transaction ID:</b> B2ADD715174B1420C95A <b>Date of Disbursement</b>
Mailing Address 1310 Pennsylvania Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20004	<b>Amount of Each Disbursement this Period</b> <div>438.18</div>
Purpose of Disbursement Lodging Candidate Name <div>Category/Type</div>	<b>[MEMO ITEM]</b>
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>B.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> BC78EE3519EEC402FAA9 <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b> <div>20000.00</div>
Purpose of Disbursement Debt Repayment Candidate Name <div>Category/Type</div>	
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>C.</b> Full Name (Last, First, Middle Initial) Coleman Printing	<b>Transaction ID:</b> B4A68A3AF17D84D74B4F <b>Date of Disbursement</b>
Mailing Address PO Box 9756	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612-9756	<b>Amount of Each Disbursement this Period</b> <div>7662.42</div>
Purpose of Disbursement Debt Repayment Candidate Name <div>Category/Type</div>	
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) .....

**27662.42**

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B2A287BAB46344F60A6B <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>14.82</div>
Candidate Name	<div>Category/ Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B13C2883180F54204934 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>140.05</div>
Candidate Name	<div>Category/ Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) FedEx Kinko's	<b>Transaction ID:</b> BA19A940B49904237A80 <b>Date of Disbursement</b>
Mailing Address 3465 N. University St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-1322	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing	<div>6.20</div>
Candidate Name	<div>Category/ Type</div>
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) ▼

[MEMO ITEM]

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

154.87

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B94FA7E3480E044658A8 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b> <div>16.25</div>
Purpose of Disbursement Postage Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B6525C3FA68A245B18D6 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b> <div>117.60</div>
Purpose of Disbursement Postage Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Wilson Grand	<b>Transaction ID:</b> BDD30A159DA6F40C880E <b>Date of Disbursement</b>
Mailing Address 429 North St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-2317	<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
Purpose of Disbursement Debt Repayment Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

5000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B6A44FB5AF1B04B538C6 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll (SEE MEMO)	<div>5862.34</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B1A904DE95BB04914B11 <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>961.87</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BF253040DA3784BFF800 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>1561.54</div>
Candidate Name	<div>Category/Type</div>
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) .....

5862.34

**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  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> BE6573925DB464B0CAF9 <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City State Zip Code Bourbonnais IL 60914-1827	<b>Amount of Each Disbursement this Period</b> <div>1499.96</div>
Purpose of Disbursement Payroll Candidate Name <div>Category/Type</div>	<b>[MEMO ITEM]</b>
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>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> BBF30C95947F94AB8816 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 4 / 2 2 / 2 0 0 8</div> </div>
City State Zip Code Rochester NY 14620-4648	<b>Amount of Each Disbursement this Period</b> <div>1838.97</div>
Purpose of Disbursement Payroll Taxes Candidate Name <div>Category/Type</div>	<b>[MEMO ITEM]</b>
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> B73A72AD74B8B432C94E <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City State Zip Code Peoria IL 61604-3036	<b>Amount of Each Disbursement this Period</b> <div>137.30</div>
Purpose of Disbursement Reimbursement (SEE MEMO) Candidate Name <div>Category/Type</div>	
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:	

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

137.30

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> BD68BD6D3D4894B5DB24 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage Candidate Name <div>Category/Type</div>	<div>43.66</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> BB355A18DD3144EE69FC <b>Date of Disbursement</b>
Mailing Address 801 West Lake St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name <div>Category/Type</div>	<div>93.64</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> B59290692BDDE4B63865 <b>Date of Disbursement</b>
Mailing Address PO Box 650448	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265-0448	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name <div>Category/Type</div>	<div>1549.68</div>
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) .....

1549.68

**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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Airlines	<b>Transaction ID:</b> BC6ACC7827CBF419DA7B <b>Date of Disbursement</b>
Mailing Address 1200 E. Algonquin Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Elk Grove Township State IL Zip Code 60007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Expense	<div>375.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) United Airlines	<b>Transaction ID:</b> BB499946DAB934DDEA0E <b>Date of Disbursement</b>
Mailing Address 1200 E. Algonquin Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Elk Grove Township State IL Zip Code 60007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Expense	<div>375.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Seven	<b>Transaction ID:</b> B3B9E9B1BF78C479B90F <b>Date of Disbursement</b>
Mailing Address 4609 Prospect Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City PEORIA HEIGHTS State IL Zip Code 61616	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meals	<div>59.45</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

0.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Shell</p> <p>Mailing Address 3300 E. Clear Lake</p> <p>City Springfield State IL Zip Code 62702</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B70F7F23FBC4140C0AF7</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>42.08</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Shell</p> <p>Mailing Address 3300 E. Clear Lake</p> <p>City Springfield State IL Zip Code 62702</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B342DE78C1F9D482DB7D</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>55.10</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 650448</p> <p>City Dallas State TX Zip Code 75265-0448</p> <p>Purpose of Disbursement Finance Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BB271F545329C458A9C0</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>40.91</div> </p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Schnucks Mailing Address 4800 N. University	<b>Transaction ID:</b> B82BD52254C9F4B0194E <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614 Purpose of Disbursement Meals 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>Amount of Each Disbursement this Period</b> <div>28.93</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Shell Mailing Address 3300 E. Clear Lake City Springfield State IL Zip Code 62702 Purpose of Disbursement Auto 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) ▼	<b>Transaction ID:</b> B1229736BA3E645F39C2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>71.49</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman Mailing Address 274 West Marsile City Bourbonnais State IL Zip Code 60914-1827 Purpose of Disbursement Reimbursement (SEE MEMO) 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>Transaction ID:</b> B7AF1D956300A4784880 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>507.08</div>

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

**507.08**

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B4710B8B97D5641EAA6B <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City State Zip Code Bourbonnais IL 60914-1827	<b>Amount of Each Disbursement this Period</b> <div>80.52</div>
Purpose of Disbursement Travel	
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B07B3C04EF27E4119BA6 <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City State Zip Code Bourbonnais IL 60914-1827	<b>Amount of Each Disbursement this Period</b> <div>78.32</div>
Purpose of Disbursement Travel	
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Decatur Conference Center & Hotel	<b>Transaction ID:</b> B6E21605F2E73466AA64 <b>Date of Disbursement</b>
Mailing Address 4191 West US Highway 36	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City State Zip Code Decatur IL 62522-1171	<b>Amount of Each Disbursement this Period</b> <div>282.24</div>
Purpose of Disbursement Lodging	
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Steven Shearer	<b>Transaction ID:</b> B9F916EBB904541F4AB7 <b>Date of Disbursement</b>
Mailing Address 1501 W. Coneflower Dr # 2216	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-7468	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Administrative Expense Reimbursement (se Candidate Name	<div> <div>679.00</div> <div>Category/Type</div> </div>
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>B.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B2AF351A17929453FA66 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage Candidate Name	<div> <div>615.00</div> <div>Category/Type</div> </div>
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>C.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> B613343B9A3444C14B6F <b>Date of Disbursement</b>
Mailing Address PO Box 650448	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75265-0448	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name	<div> <div>2909.76</div> <div>Category/Type</div> </div>
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) .....

**3588.76**

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

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Circle K</p> <p>Mailing Address 319 N Main</p> <p>City Morton State IL Zip Code 61550</p> <p>Purpose of Disbursement Auto Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA9585BDFC39A4997AE1</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="52.95"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Enterprise Rent A Car</p> <p>Mailing Address 4323 N University</p> <p>City Peoria State IL Zip Code 61604</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B12293EF47EA246D4939</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="206.62"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) The Inn on Fifth</p> <p>Mailing Address 699 5th Ave South</p> <p>City Naples State FL Zip Code 34102</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BB99AE180A97C41DDB72</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <input type="text" value="0.00"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <input type="text"/></p>	

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Circle K	<b>Transaction ID:</b> BD48BC0A4BC3A461485C <b>Date of Disbursement</b>
Mailing Address 319 N Main	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City Morton State IL Zip Code 61550	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies Candidate Name <div>Category/Type</div>	<div>88.60</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Circle K	<b>Transaction ID:</b> B208E98F8A44940EEAB9 <b>Date of Disbursement</b>
Mailing Address 319 N Main	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City Morton State IL Zip Code 61550	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Auto Supplies Candidate Name <div>Category/Type</div>	<div>88.51</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Airtran Airways	<b>Transaction ID:</b> BA702BEEC74394B1C812 <b>Date of Disbursement</b>
Mailing Address 1800 Phoenix Blvd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30349	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Expense Candidate Name <div>Category/Type</div>	<div>290.50</div>
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>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Seven	<b>Transaction ID:</b> B45CDAAD3C5AE463B843 <b>Date of Disbursement</b>
Mailing Address 4609 Prospect Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code PEORIA HEIGHTS IL 61616	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meals	<div>196.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> BD598CFD58A7546E9915 <b>Date of Disbursement</b>
Mailing Address PO Box 650448	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Dallas TX 75265-0448	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fincance Charges	<div>70.52</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Janice M Knapp	<b>Transaction ID:</b> B6B00AA93B96643CD810 <b>Date of Disbursement</b>
Mailing Address 6021 N. Imperial Dr Apt. 130	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City State Zip Code Peoria IL 61614-3964	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement (SEE MEMO)	<div>210.76</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

210.76

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> B2E91534B65734695AF0 <b>Date of Disbursement</b>
Mailing Address 801 West Lake St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614 Purpose of Disbursement Office Supplies Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>44.41</div>
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) ▼	<div>Category/Type</div> <div>[MEMO ITEM]</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Peoria Flag & Decorating	<b>Transaction ID:</b> B981CA9AD4CB24E789CB <b>Date of Disbursement</b>
Mailing Address 920 E Glen Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Peoria Heights State IL Zip Code 61616 Purpose of Disbursement Office Supplies Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>28.27</div>
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) ▼	<div>Category/Type</div> <div>[MEMO ITEM]</div>
<b>C.</b> Full Name (Last, First, Middle Initial) US Postmaster	<b>Transaction ID:</b> B30513D3F5A5C400AB61 <b>Date of Disbursement</b>
Mailing Address 6310 N University St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61614-3487 Purpose of Disbursement Postage Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>133.13</div>
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) ▼	<div>Category/Type</div> <div>[MEMO ITEM]</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Wilson Grand	<b>Transaction ID:</b> BA8EF136CB5B048F6944 <b>Date of Disbursement</b>
Mailing Address 429 North St Asaph St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22314-2317	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Debt Repayment	<div>5000.00</div>
Candidate Name	<div>Category/Type</div>
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>B.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> B64BECEB5FAD74DEEB30 <b>Date of Disbursement</b>
Mailing Address 150 Sawgrass Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 0 8</div> </div>
City Rochester State NY Zip Code 14620-4648	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll (SEE MEMO)	<div>6279.60</div>
Candidate Name	<div>Category/Type</div>
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>C.</b> Full Name (Last, First, Middle Initial) Mrs. Katherine A. Coyle	<b>Transaction ID:</b> B0A97DC3EFF4B42FA931 <b>Date of Disbursement</b>
Mailing Address 10511 N. Sunrise Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61615-8831	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll	<div>961.87</div>
Candidate Name	<div>Category/Type</div>
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) ▼

[MEMO ITEM]

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

11279.60

**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:  
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NAME OF COMMITTEE (In Full)  
Schock for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel L. Honegger	<b>Transaction ID:</b> BC8971148C9ED470A998 <b>Date of Disbursement</b>
Mailing Address 2304 N. Lehman Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61604-3036	<b>Amount of Each Disbursement this Period</b> <div>1417.25</div>
Purpose of Disbursement Payroll	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Erik C. Rayman	<b>Transaction ID:</b> B82EC125E59A7439286F <b>Date of Disbursement</b>
Mailing Address 274 West Marsile	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 0 8</div> </div>
City Bourbonnais State IL Zip Code 60914-1827	<b>Amount of Each Disbursement this Period</b> <div>1499.96</div>
Purpose of Disbursement Payroll	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Wade A. Dooley	<b>Transaction ID:</b> B927B84E6DCFC4B509F0 <b>Date of Disbursement</b>
Mailing Address 4021 S. Sheffield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 8 / 2 0 0 8</div> </div>
City Bartonville State IL Zip Code 61607-2197	<b>Amount of Each Disbursement this Period</b> <div>469.67</div>
Purpose of Disbursement Payroll	<div>Category/Type</div>
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>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Schock for Congress

A.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 150 Sawgrass Dr

City  
Rochester

State  
NY

Zip Code  
14620-4648

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: B7A860570108B4A8DAA7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1930.85

[MEMO ITEM]

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

0.00

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

271440.77

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wilson Grand

Nature of Debt (Purpose):  
Advertising Expenses

Mailing Address 429 North St Asaph St

City State ZIP Code  
Alexandria VA 22314-2317

Outstanding Balance Beginning This Period

5000.00

Transaction ID: D016DEA0794004B0ABC5

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Coleman Printing

Nature of Debt (Purpose):  
Printing

Mailing Address PO Box 9756

City State ZIP Code  
Peoria IL 61612-9756

Outstanding Balance Beginning This Period

2149.17

Transaction ID: DC9C121ED3F674914A89

Amount Incurred This Period

0.00

Payment This Period

2149.17

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Coleman Printing

Nature of Debt (Purpose):  
Printing

Mailing Address PO Box 9756

City State ZIP Code  
Peoria IL 61612-9756

Outstanding Balance Beginning This Period

27662.42

Transaction ID: D18B541A4AF1B463CB69

Amount Incurred This Period

0.00

Payment This Period

27662.42

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

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)

PAGE 227 / 227

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Schock for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mr. Aaron Jon Schock

Nature of Debt (Purpose):  
Campaign events expense  
reimbursement

Mailing Address 1040 East Melbourne Ave

City State ZIP Code  
Peoria IL 61603-2026

Outstanding Balance Beginning This Period

9731.68

Transaction ID: DEE78FEADAAE947A3ADF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9731.68

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wilson Grand

Nature of Debt (Purpose):  
Advertising Expenses

Mailing Address 429 North St Asaph St

City State ZIP Code  
Alexandria VA 22314-2317

Outstanding Balance Beginning This Period

5000.00

Transaction ID: DE854FE68468A4494B79

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mr. Steven Shearer

Nature of Debt (Purpose):  
Travel expense reimburse-  
ment
Mailing Address 1501 W. Coneflower Dr  
# 2216
City State ZIP Code  
Peoria IL 61615-7468

Outstanding Balance Beginning This Period

1705.00

Transaction ID: D3ED60B6895D747638AC

Amount Incurred This Period

0.00

Payment This Period

1705.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

9731.68

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

9731.68

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)

9731.68