

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
CME/PAC, CHICAGO MERCANTILE EXCHANGE INC. PAC

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

2. **FEC IDENTIFICATION NUMBER** C00076299
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 09 01 2006 through 09 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Ronald A. Pankau

Signature of Treasurer Electronically Filed by Mr. Ronald A. Pankau Date 10 04 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		243902.83
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	344581.44									
(c) Total Receipts (from Line 19)	33373.64	356052.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	377955.08	599955.08								
7. Total Disbursements (from Line 31)	33500.00	255500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	344455.08	344455.08								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	29367.05	318618.24
(i) Itemized (use Schedule A)	4006.59	37434.01
(ii) Unitemized	33373.64	356052.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	33373.64	356052.25
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	33373.64	356052.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33373.64	356052.25

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33500.00	255500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33500.00	255500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33500.00	255500.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	33373.64	356052.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33373.64	356052.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. Michael Briskey		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 5530 Ridgewood Dr.		Transaction ID: SA11A1.12502	
City State Zip Code Western Springs IL 60558		Amount of Each Receipt this Period 27.28	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 381.92	

Full Name (Last, First, Middle Initial) B. Michael Briskey		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 5530 Ridgewood Dr.		Transaction ID: SA11A1.12555	
City State Zip Code Western Springs IL 60558		Amount of Each Receipt this Period 27.28	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 409.20	

Full Name (Last, First, Middle Initial) C. Thomas Burling		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 3628 Monarch Circle		Transaction ID: SA11A1.12503	
City State Zip Code Naperville IL 60564		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	79.56
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Thomas Burling

Mailing Address 3628 Monarch Circle

City State Zip Code
Naperville IL 60564

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

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

Occupation
Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12556

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Clarence Chambliss

Mailing Address 631 D St., NW

City State Zip Code
Washington DC 20004

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

Name of Employer
CME, 701 Pennsylvania, DC

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12504

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Clarence Chambliss

Mailing Address 631 D St., NW

City State Zip Code
Washington DC 20004

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

Name of Employer
CME, 701 Pennsylvania, DC

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12557

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Tom Ciardiello

Mailing Address 1086 Brighton Dr.

City State Zip Code
Carol Stream IL 60188

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

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

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12505

Amount of Each Receipt this Period
23.00

B. Full Name (Last, First, Middle Initial)
Tom Ciardiello

Mailing Address 1086 Brighton Dr.

City State Zip Code
Carol Stream IL 60188

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

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

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12558

Amount of Each Receipt this Period
23.00

C. Full Name (Last, First, Middle Initial)
Lanae Clarke

Mailing Address 165 D St., SE

City State Zip Code
Washington DC 20003

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

Name of Employer
CME, 701 Pennsylvania, DC

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12507

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)	▶	81.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Lanae Clarke

Mailing Address 165 D St., SE

City Washington State DC Zip Code 20003

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

Name of Employer CME, 701 Pennsylvania, DC Occupation Associate Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12560

Amount of Each Receipt this Period
35.00

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

Mailing Address 73 Salem Lane

City Evanston State IL Zip Code 60203

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12561

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Roger Crabtree

Mailing Address 531 Arbor Ln.

City Oswego State IL Zip Code 60543

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12509

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Roger Crabtree		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 531 Arbor Ln.		Transaction ID: SA11A1.12562	
City State Zip Code Oswego IL 60543		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Michael Crawshaw		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 3900 Wolf Rd.		Transaction ID: SA11A1.12510	
City State Zip Code Western Springs IL 60558		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Michael Crawshaw		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 3900 Wolf Rd.		Transaction ID: SA11A1.12563	
City State Zip Code Western Springs IL 60558		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Kathleen Cronin		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 2660 N. Southport		Transaction ID: SA11A1.12512	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3400.00	

Full Name (Last, First, Middle Initial) B. Kathleen Cronin		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 2660 N. Southport		Transaction ID: SA11A1.12565	
City State Zip Code Chicago IL 60614		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3600.00	

Full Name (Last, First, Middle Initial) C. William Evans		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 744 Alberosky Way		Transaction ID: SA11A1.12568	
City State Zip Code Batavia IL 60510		Amount of Each Receipt this Period 122.23	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 244.46	

SUBTOTAL of Receipts This Page (optional) ▶	522.23
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Allison Ferconio		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address 1820 Oliver		Transaction ID: SA11A1.12516	
City State Zip Code Whiting IN 46394	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) B. Allison Ferconio		Date of Receipt M M / D D / Y Y Y Y Y 09 / 22 / 2006	
Mailing Address 1820 Oliver		Transaction ID: SA11A1.12569	
City State Zip Code Whiting IN 46394	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Laura Giacomino		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006	
Mailing Address 321 Ferndale		Transaction ID: SA11A1.12518	
City State Zip Code Elmhurst IL 60126	Amount of Each Receipt this Period 22.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Associate Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.00		

SUBTOTAL of Receipts This Page (optional) ▶	52.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Laura Giacomino		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 321 Ferndale		Transaction ID: SA11A1.12570	
City State Zip Code Elmhurst IL 60126		Amount of Each Receipt this Period 22.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. Nancy W. Goble		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 332 S. Madison Ave.		Transaction ID: SA11A1.12521	
City State Zip Code La Grange IL 60525		Amount of Each Receipt this Period 185.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2590.00	

Full Name (Last, First, Middle Initial) C. Nancy W. Goble		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 332 S. Madison Ave.		Transaction ID: SA11A1.12573	
City State Zip Code La Grange IL 60525		Amount of Each Receipt this Period 185.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2775.00	

SUBTOTAL of Receipts This Page (optional) ▶	392.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
R. Brandon Grometer

Mailing Address 4711 E. Frye Rd.

City State Zip Code
Phoenix AZ 85048

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12522

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
R. Brandon Grometer

Mailing Address 4711 E. Frye Rd.

City State Zip Code
Phoenix AZ 85048

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12574

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
John Harangody

Mailing Address 8348 Castle Dr.

City State Zip Code
Munster IN 46321

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

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

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2006

Transaction ID: SA11A1.12495

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Yra G. Harris		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2006	
Mailing Address 6461 Longmeadow		Transaction ID: SA11A1.12486	
City State Zip Code Lincolnwood IL 60646		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Commodity Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Hausoul		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 179 S. Kenilworth		Transaction ID: SA11A1.12576	
City State Zip Code Elmhurst IL 60126		Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.82	

Full Name (Last, First, Middle Initial) C. Eileen Beth Keeve		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 808 Burhess Hill Rd.		Transaction ID: SA11A1.12525	
City State Zip Code Naperville IL 60565		Amount of Each Receipt this Period 227.28	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3181.92	

SUBTOTAL of Receipts This Page (optional) ▶	5265.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Eileen Beth Keeve		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 808 Burhess Hill Rd.		Transaction ID: SA11A1.12577	
City State Zip Code Naperville IL 60565		Amount of Each Receipt this Period 227.28	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3409.20	

Full Name (Last, First, Middle Initial) B. Randy Kelley		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 2668 Providence Ave.		Transaction ID: SA11A1.12527	
City State Zip Code Aurora IL 60504		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Randy Kelley		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 2668 Providence Ave.		Transaction ID: SA11A1.12579	
City State Zip Code Aurora IL 60504		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	257.28
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. David Kempes		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 600 S. Dearborn St.		Transaction ID: SA11A1.12528	
City State Zip Code Chicago IL 60605		Amount of Each Receipt this Period 22.75	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 318.50	

Full Name (Last, First, Middle Initial) B. David Kempes		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 600 S. Dearborn St.		Transaction ID: SA11A1.12580	
City State Zip Code Chicago IL 60605		Amount of Each Receipt this Period 22.75	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.25	

Full Name (Last, First, Middle Initial) C. Paul Kepes		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006	
Mailing Address 440 S. LaSalle St. - #1850		Transaction ID: SA11A1.12481	
City State Zip Code Chicago IL 60605		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CTC Holdings, LLC, Chicago		Occupation Owner/Commodity Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	2545.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Neal Kottke		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2006	
Mailing Address 141 W. Jackson Blvd. - #1620		Transaction ID: SA11A1.12488	
City State Zip Code Chicago IL 60604		Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Kottke Associates, LLC, Chicago		Occupation President/Commodity Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. Robert Krewer		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 441 N. Beverly		Transaction ID: SA11A1.12530	
City State Zip Code Arlington Heights IL 60005		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Robert Krewer		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 441 N. Beverly		Transaction ID: SA11A1.12582	
City State Zip Code Arlington Heights IL 60005		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional) ▶	4160.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Brian Linker

Mailing Address 4922P S. Cornell Ave.

City Chicago State IL Zip Code 60615

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 08 / 2006

Transaction ID: SA11A1.12532

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Brian Linker

Mailing Address 4922P S. Cornell Ave.

City Chicago State IL Zip Code 60615

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 22 / 2006

Transaction ID: SA11A1.12584

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Anita Liskey

Mailing Address 3607 Lawrence Dr.

City Naperville State IL Zip Code 60564

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 07 / 2006

Transaction ID: SA11A1.12446

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Thomas R. Lord

Mailing Address 2334 W. Morse

City State Zip Code
Chicago IL 60645

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12533

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Thomas R. Lord

Mailing Address 2334 W. Morse

City State Zip Code
Chicago IL 60645

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12585

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Kenneth Lovett

Mailing Address 190 Norwich Ct.

City State Zip Code
Lake Bluff IL 60044

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.12447

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	540.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Felipe Martinez

Mailing Address 2620 Bern Ct.

City State Zip Code
Woodridge IL 60517

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.44

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12536

Amount of Each Receipt this Period
20.46

B. Full Name (Last, First, Middle Initial)
Felipe Martinez

Mailing Address 2620 Bern Ct.

City State Zip Code
Woodridge IL 60517

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.90

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12588

Amount of Each Receipt this Period
20.46

C. Full Name (Last, First, Middle Initial)
John Martschinke

Mailing Address 9600 S. Winchester

City State Zip Code
Chicago IL 60643

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2006

Transaction ID: SA11A1.12458

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	340.92
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Paul Meacham		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 19437 Lisadell Dr.		Transaction ID: SA11A1.12537	
City State Zip Code Tinley Park IL 60477	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Associate Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) B. Paul Meacham		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 19437 Lisadell Dr.		Transaction ID: SA11A1.12589	
City State Zip Code Tinley Park IL 60477	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Associate Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Christopher Mead		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 798 Highview		Transaction ID: SA11A1.12590	
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 38.50		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00		

SUBTOTAL of Receipts This Page (optional) ▶	78.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Lawrence Nawrot

Mailing Address 357 Donna Lane

City State Zip Code
Bloomington IL 60108

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12539

Amount of Each Receipt this Period
91.00

B. Full Name (Last, First, Middle Initial)
Lawrence Nawrot

Mailing Address 357 Donna Lane

City State Zip Code
Bloomington IL 60108

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
546.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12591

Amount of Each Receipt this Period
91.00

C. Full Name (Last, First, Middle Initial)
Roberto Padilla

Mailing Address 5313 Woodland

City State Zip Code
Western Springs IL 60558

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
636.44

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12540

Amount of Each Receipt this Period
45.46

SUBTOTAL of Receipts This Page (optional)	▶	227.46
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Roberto Padilla

Mailing Address 5313 Woodland

City State Zip Code
Western Springs IL 60558

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
681.90

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12592

Amount of Each Receipt this Period
45.46

B. Full Name (Last, First, Middle Initial)
Stephen Paoletti

Mailing Address 710 Chester Ave.

City State Zip Code
Park Ridge IL 60068

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

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

Occupation
Commodity Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2006

Transaction ID: SA11A1.12473

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Philip Papesh

Mailing Address 10337 Fox Run Ln.

City State Zip Code
Munster IN 46321

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

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

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.12541

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)	▶	5080.46
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Philip Papesh

Mailing Address 10337 Fox Run Ln.

City State Zip Code
Munster IN 46321

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

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

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12593

Amount of Each Receipt this Period
35.00

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

Mailing Address 871 Pleasant Ave.

City State Zip Code
Highland Park IL 60035

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

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

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2006

Transaction ID: SA11A1.12448

Amount of Each Receipt this Period
500.00

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

Mailing Address 6231 Cove Creek Ct.

City State Zip Code
Burr Ridge IL 60527

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

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

Occupation
Commodity Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2006

Transaction ID: SA11A1.12494

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1035.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. John Restivo		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2006	
Mailing Address 7705 W. Armitage		Transaction ID: SA11A1.12459	
City State Zip Code Elmwood Park IL 60707		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Eric Riedesel		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 161 W. Harrison St.		Transaction ID: SA11A1.12544	
City State Zip Code Chicago IL 60605		Amount of Each Receipt this Period 45.46	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 636.44	

Full Name (Last, First, Middle Initial) C. Eric Riedesel		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 161 W. Harrison St.		Transaction ID: SA11A1.12596	
City State Zip Code Chicago IL 60605		Amount of Each Receipt this Period 45.46	
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL		Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 681.90	

SUBTOTAL of Receipts This Page (optional) ▶	1090.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
Jeffrey Rotter

Mailing Address 3850 Bordeaux Dr.

City Hoffman Estates State IL Zip Code 60195

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2006

Transaction ID: SA11A1.12497

Amount of Each Receipt this Period
550.00

B. Full Name (Last, First, Middle Initial)
Laurie Small

Mailing Address 90 Greenbriar E.

City Deerfield State IL Zip Code 60015

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

Name of Employer Self-Employed
Occupation Commodity Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2006

Transaction ID: SA11A1.12498

Amount of Each Receipt this Period
350.00

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

Mailing Address 814 Barnsdale Rd.

City La Grange Park State IL Zip Code 60526

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.82

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2006

Transaction ID: SA11A1.12600

Amount of Each Receipt this Period
38.47

SUBTOTAL of Receipts This Page (optional)	▶	938.47
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Stephen Staszak		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2006	
Mailing Address 8915 W. 98th Pl.		Transaction ID: SA11A1.12490	
City State Zip Code Palos Hills IL 60465	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Michael Unetich		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 2457 N. Burling St.		Transaction ID: SA11A1.12474	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CME, 20 S. Wacker Dr., Chicago	Occupation Commodity Trader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. John Watrous		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006	
Mailing Address 440 S. LaSalle St. - #1850		Transaction ID: SA11A1.12483	
City State Zip Code Chicago IL 60605	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CTC Holdings, LLC, Chicago	Occupation Owner/Commodity Trader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) Eric Wolff Mailing Address 923 W. Fullerton City Chicago State IL Zip Code 60614 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2006 Transaction ID: SA11A1.12491 Amount of Each Receipt this Period 1000.00
Name of Employer CME, 20 S. Wacker Dr., Chicago Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial) Steven Youngren Mailing Address 794 W. Chicago City Elgin State IL Zip Code 60123 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2006 Transaction ID: SA11A1.12460 Amount of Each Receipt this Period 350.00
Name of Employer CME, 20 S. Wacker Dr., Chicago, IL Occupation Associate Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00

C. Full Name (Last, First, Middle Initial) Kathleen Zaino Mailing Address 3247 W. 11th St. City Chicago State IL Zip Code 60655 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006 Transaction ID: SA11A1.12551 Amount of Each Receipt this Period 30.00
Name of Employer CME, 20 S. Wacker Dr., Chicago Occupation Associate Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00

SUBTOTAL of Receipts This Page (optional)	1380.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 30 / 36	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Kathleen Zaino

Mailing Address 3247 W. 11th St.

City State Zip Code
Chicago IL 60655

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

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

Occupation
Associate Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

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

Transaction ID: SA11A1.12603

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	29367.05

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Mary Bono		Transaction ID: SB23.12426 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6	
Mailing Address Mary Bono Committee 1555 S. Palm Canyon Dr.		Amount of Each Disbursement this Period 1000.00	
City Palm Springs	State CA		Zip Code 92264
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 44			

Full Name (Last, First, Middle Initial) B. David Camp		Transaction ID: SB23.12445 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address Dave Camp for Congress 5915 Eastman Ave.		Amount of Each Disbursement this Period 1000.00	
City Midland	State MI		Zip Code 48640
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MI District: 4			

Full Name (Last, First, Middle Initial) C. Lincoln Chafee		Transaction ID: SB23.12440 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6	
Mailing Address Chafee for Senate P.O. Box 7329		Amount of Each Disbursement this Period 5000.00	
City Warwick	State RI		Zip Code 02887
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: RI District:			

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 36

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

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

Full Name (Last, First, Middle Initial) A. Kent Conrad		Transaction ID: SB23.12435 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address Friends of Kent Conrad 301 N. 4th St.		Amount of Each Disbursement this Period 4000.00
City Bismarck State ND Zip Code 58501	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Eliot L. Engel		Transaction ID: SB23.12423 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address Engel for Congress 462 California Rd.		Amount of Each Disbursement this Period 2000.00
City Bronxville State NY Zip Code 10708	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 17	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Bob Goodlatte		Transaction ID: SB23.12438 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address Bob Goodlatte for Congress Com. P.O. Box 292		Amount of Each Disbursement this Period 3000.00
City Roanoke State VA Zip Code 24002	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 36

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

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

Full Name (Last, First, Middle Initial) A. J. Dennis Hastert		Transaction ID: SB23.12424 Date of Disbursement 09 / 08 / 2006	
Mailing Address Hastert for Congress Committee 15 E. Wilson		Amount of Each Disbursement this Period 5000.00	
City Batavia	State IL	Zip Code 60510	
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IL District: 14		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ruben Hinojosa		Transaction ID: SB23.12433 Date of Disbursement 09 / 14 / 2006	
Mailing Address Hinojosa for Congress P.O. Box 720452		Amount of Each Disbursement this Period 500.00	
City McAllen	State TX	Zip Code 78504	
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TX District: 15		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Steny H. Hoyer		Transaction ID: SB23.12428 Date of Disbursement 09 / 13 / 2006	
Mailing Address Hoyer for Congress 40740 Parlett Morgan Rd.		Amount of Each Disbursement this Period 2500.00	
City Mechanicsville	State MD	Zip Code 20659	
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: MD District: 5		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Paul E. Kanjorski		Transaction ID: SB23.12431 Date of Disbursement 09 / 14 / 2006
Mailing Address Pennsylvanians for Cong. Kanjorski 126 S. Franklin St.		Amount of Each Disbursement this Period 1000.00
City Wilkes-Barre	State PA	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 11		

Full Name (Last, First, Middle Initial) B. Peter T. King		Transaction ID: SB23.12437 Date of Disbursement 09 / 14 / 2006
Mailing Address Pete King for Congress Committee P.O. Box 1428		Amount of Each Disbursement this Period 1000.00
City Seaford	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 3		

Full Name (Last, First, Middle Initial) C. Jon Kyl		Transaction ID: SB23.12430 Date of Disbursement 09 / 14 / 2006
Mailing Address Jon Kyl for U.S. Senate P.O. Box 10246		Amount of Each Disbursement this Period 1500.00
City Phoenix	State AZ	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Dennis Moore		Transaction ID: SB23.12434 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address Moore for Congress 7852 Quivira Rd.		Amount of Each Disbursement this Period 500.00
City Lenexa	State KS	
Zip Code 66216		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 3	

Full Name (Last, First, Middle Initial) B. Jerry Moran		Transaction ID: SB23.12443 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address Moran for Congress P.O. Box 1151		Amount of Each Disbursement this Period 1000.00
City Hays	State KS	
Zip Code 67601		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KS District: 1	

Full Name (Last, First, Middle Initial) C. Deborah Pryce		Transaction ID: SB23.12429 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 6
Mailing Address Deborah Pryce for Congress 145 E. Rich St.		Amount of Each Disbursement this Period 1000.00
City Columbus	State OH	
Zip Code 43215		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 15	

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

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Rely on Your Beliefs Fund		Transaction ID: SB23.12442	
Mailing Address 333 Park Central East - #214		Date of Disbursement MM / DD / YYYY 09 / 21 / 2006	
City Springfield	State MO	Zip Code 65084	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Committee		

Full Name (Last, First, Middle Initial) B. David Scott		Transaction ID: SB23.12439	
Mailing Address David Scott for Congress 162 Hurt St., NE		Date of Disbursement MM / DD / YYYY 09 / 19 / 2006	
City Atlanta	State GA	Zip Code 30307	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: GA District: 13	Committee		

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

33500.00