

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

DCCC

A. Howard Osborn

Date of Disbursement

Transaction ID : VT3CV9J3DG1

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:



5.00

B. Howard Osborn

Full Name (Last, First, Middle Initial)

Mailing Address 3000 S 1st St

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
Champaign	IL	61822-7108

Transaction ID : VT3CV9J3DK4

Purpose of Disbursement	Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. Howard Osborn

Full Name (Last, First, Middle Initial)

Mailing Address 3000 S 1st St

Date of Disbursement

City	State	Zip Code
Champaign	IL	61822-7108

Transaction ID : VT3CV9J3DS2

Purpose of Disbursement	Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

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).....

Age Group	Percentage
18-24	23.5
25-34	21.5
35-44	19.5
45-54	17.5
55-64	15.5
65-74	13.5
75-84	11.5
85+	1.5

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