

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

DCCC

A. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement	Contribution Refund

Candidate Name

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

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : VT3CV9J3H61

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	50

Full Name (Last, First, Middle Initial)

B. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement	Contribution Refund

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) ▼		

Date of Disbursement

Transaction ID : VT3CV9J3H79

Amount of Each Disbursement this Period



Full Name (Last, First, Middle Initial)

C. Howard Osborn

Mailing Address 3000 S 1st St

City	State	Zip Code
Champaign	IL	61822-7108

Purpose of Disbursement	Contribution Refund

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) ▼		

Date of Disbursement

Transaction ID : VT3CV9J3H87

Amount of Each Disbursement this Period



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

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

60.00