

Tolbert Chisum

631 Park Drive -- Kenilworth, IL 60043

August 22, 2006

Lawrence H. Norton, Esq.
General Counsel
Federal Election Commission
999 E Street, NW
Washington, D.C. 20463

MUR # 5800

2006 AUG 23 A 11:45

FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COUNSEL

Re: **Improper In-Kind, Undisclosed Campaign Support to Dan Seals for Congress**

Dear Mr. Norton:

We respectfully file this complaint against Schakowsky for Congress and Dan Seals for Congress, the principal campaign committees for Janice Schakowsky and Daniel Seals, candidates for the U.S. House of Representatives in Illinois' ninth and tenth Congressional Districts, for alleged violations of federal law mandating the full disclosure of in-kind contributions from one federal committee to another.

As the Commission well knows, federal law requires candidates running for Congress to disclose in-kind contributions. 2 USC 441a(a)(7)(B)(i)(i) and 11CFR 100.52 (d) (1) & 100. 111 (e)(1).

On December 7, 2005, the Dan Seals campaign filed FEC Form One containing its Statement of Organization, officially declaring Mr. Seals a candidate for Congress. As a declared candidate for Congress, he must comply with federal law and FEC regulations mandating full disclosure of in-kind contributions to his campaign.

On April 14, 1997, the Schakowsky campaign filed FEC Form One containing its Statement of Organization, officially declaring Ms. Schakowsky a candidate for Congress. As a declared candidate for Congress, she must comply with federal law and FEC regulations mandating full disclosure of in-kind contributions to her campaign.

On July 15, 2006, the Dan Seals and the Schakowsky campaigns transmitted their reports to the FEC, disclosing their receipts and disbursements. Neither campaign's July Quarterly filing disclose an in-kind contribution from the Schakowsky campaign to the Dan Seals campaign.

On June 9, 2006, candidate Jan Schakowsky mailed a soliciting letter on behalf of the Dan Seals campaign. The letter was sent on Schakowsky campaign stationery with a disclaimer claiming the letter was paid for by the Schakowsky campaign. Included with

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the letter was a Dan Seals for Congress contribution envelope with a disclaimer claiming the envelope was paid for by the Seals campaign.

Copies of the fundraising letter and contribution envelope are attached along with copies of both campaigns' most recent FEC disclosure. Clearly, both Seals' and Schakowsky's own disclosure forms to the FEC show no mention of an in-kind contribution. On its face, these documents show Schakowsky for Congress made an undisclosed in-kind contribution to Dan Seals for Congress—with full knowledge and coordination with the Seals campaign—in clear violation of federal law and FEC regulations. We respectfully request that the Commission investigate this matter, mandate the full disclosure of the in-kind contribution and penalize both Schakowsky for Congress and Dan Seals for Congress accordingly for such violations of the law.

Respectfully,



Tolbert Chisum

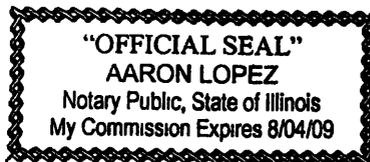
Enclosures:

- A. Improper in-kind undisclosed support to Dan Seals for Congress
- B. FEC Disclosure Form failing to disclose contribution by Schakowsky for Congress
- C. FEC Disclosure Form failing to disclose receipt of support by Seals for Congress

Sworn before me this 22 day of August, 2006.



NOTARY PUBLIC



27190271394



Jan Schakowsky
 U S Congresswoman
 P O Box 5130
 Evanston, IL 60204-5130



MAIL

Stephen Malkin
 440 Lake Side Terrace
 Glencoe, IL 60222

PALMATTINE IL 600
 09 JUN 2006 PM 5 L



60022+1733



56512206172

PO Box 5130
Evanston, IL 60204-5130
Tel 847-424-1998
Fax 847-332-1998
www.janschakowsky.org

June 9, 2006

Stephen Malkin
440 Lake Side Terrace
Glencoe, IL 6022

Dear Stephen,

The end could be near. I mean the end of total control of our government by the Republicans and their policies. A recent political cartoon accused them of identity theft – “stealing the identity of our country”

Democrats have had no better chance to win control of the House of Representatives than we do now. With considerable help from the Democrats, the wheels are falling off what once seemed an invincible Republican machine

Democrats are not waiting and hoping for the Republicans to self-destruct. We have the best field of challengers that we have ever had. That's no surprise, because when victory is in the air, great candidates are willing to step up

We have a great candidate in Illinois' 10th district, the district just north of mine that runs from Wilmette nearly to the Wisconsin border. This candidate's name is Dan Seals, and he can beat Mark Kirk if we all get behind him

If you haven't met Dan Seals, I hope you will find the opportunity to do so. You will know right away why I am so enthusiastic about him. Dan is a Barack Obama kind of guy (In fact, he was repeatedly mistaken for him at my recent women's lunch.) But it's not just his looks. He is articulate, inspiring, and has a great resume that includes extensive business and government experience. He exudes leadership ability. It doesn't take much imagination to picture Dan in Congress.

A quick summary of Dan Seals' fine credentials.

Born and raised in Chicago * Graduate of Boston University, MA in International Studies from Johns Hopkins, MBA from the University of Chicago * Taught English in Japan; fluent in Japanese * Winner of a Presidential Management Fellowship during which he worked at the Department of Commerce and for Senator Joe Lieberman * Employers include Sprint, for whom he managed programs responsible for half a billion dollars in revenue, and currently GE Commercial Finance where Dan is Director of Marketing for a real estate lending business * Lives in Wilmette with his wife and three daughters * And just to know, his Dad is George Seals, former Chicago Bears star

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Mark Kirk is the incumbent Republican and likes to portray himself as a moderate, but his record proves otherwise. He votes with the Bush Administration and Republican leadership 90% of the time. He holds the leadership role of Assistant Majority Whip – a position that requires him to support his party on key votes and line up others to vote the “right” way. He is a great supporter of the war in Iraq, voted for Congress to intervene in the Terry Schiavo situation, and voted to open up the Alaska National Wildlife Refuge to oil drilling. Kirk may support Israel, an issue of great importance to many in the 10th District, but Dan Seals’ positions on Israel ensure that he will be equally strong.

Even if you don’t live in the 10th District, this race is of critical importance to you. Democrats need only gain another 15 seats in the House of Representatives in order to be in the majority. Dan can be one of those seats. In presidential races, Bill Clinton, Al Gore and John Kerry all won the 10th District by increasing margins. Durbın and Obama both won it easily. This is a district ready to be represented by a Democrat.

In order to win he needs money and lots of it. The Republicans are not going to give this seat up without a huge fight. Once people see Dan – in person, in the mail, on TV – or hear about him on the radio, they will want to support him. Without the funds to communicate, Dan cannot be successful. It’s as simple as that.

In addition to your money, Dan needs your time. There is nothing like a personal call or someone at your front door to convince a person to vote our way. Volunteers are needed for a wide variety of additional campaign activities. It’s fun and it’s very, very helpful.

And finally, imagine this. When Dan wins and the Democrats take back the House, we can end the abuse of power that allows this President to use the tragedy of 9/11 to do everything from invade countries to invade your privacy. We can end government of, by and for Big Oil and begin addressing global warming and other threats to life on our planet. We can stop the assaults on women’s reproductive rights, human rights and civil rights. We can begin to address the crises in health care, energy, housing and education. We can win back the proud identity of our country as a beacon of freedom and democracy and regain our stature around the world. And we will have the momentum we need to finally change the direction of our country in 2008.

Dan Seals, a Congressman you will be proud of, can be the 15th winner that will make all the difference. Please help him.

Sincerely,



Jan Schakowsky

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The information below is required:

Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year

NAME _____

ADDRESS _____ EMAIL _____

CITY _____ STATE _____ ZIP _____ PHONE _____

OCCUPATION _____ EMPLOYER _____

AMOUNT \$2100 \$1000 \$500 \$250 \$100 OTHER _____

I want to help! You can count on me to:

- Add my name as a supporter
- Work in the office
- Make phone calls
- Canvass door-to-door
- Display a yardsign
- Host a coffee or event

- Work Election Day
- Write letters to the editor
- Collect e-mail addresses from my friends
- Other _____

www.dansealsforcongress.com 847-205-1606

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Please make checks payable to Dan Seals for Congress or charge by credit card by completing the following

ACCOUNT # - EXPIRATION DATE _____ / _____

AMOUNT _____ MONTHLY CONTRIBUTION VISA MASTERCARD OTHER _____

YOU MUST CONFIRM THE STATEMENT BELOW

I am 18 years of age or older I am a U S Citizen or have permanent status in the U S I have made this contribution solely from my own personal funds and not from the funds of any business entity or labor organization

SIGNATURE _____ DATE _____

Contributions to Dan Seals for Congress are subject to the prohibitions and limitations of the Federal Election Campaign Act That law prohibits contributions from corporations, labor unions, national banks, government contractors and foreign nationals who are not entitled to permanent residence All contributions must be made from personal funds and may not be reimbursed by any other person Contributions to Dan Seals for Congress are not tax deductible for federal income tax purposes

To find out more about Dan Seals and his campaign, visit www.dansealsforcongress.com
Dan Seals for Congress



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P.O. Box 784, Glenview, IL 60025
www.dansealsforcongress.com

PLACE
FIRST
CLASS
STAMP
HERE

Dan Seals for Congress
P.O. Box 784
Glenview, IL 60025

Paid for by Dan Seals for Congress



**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

SCHAKOWSKY FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 5130

Check if different than previously reported (ACC)

EVANSTON

IL

60204

2 FEC IDENTIFICATION NUMBER

C00327023

CITY A

STATE A

ZIP CODE A

STATE DISTRICT

3 IS THIS REPORT NEW (N) OR AMENDED (A)

IL

09

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 2006 through 06 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 Melanie Rovner Cohen

Signature of Treasurer Electronically Filed by Melanie Rovner Cohen Date 07 14 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

Office Use Only

FEC FORM 3
(Revised 02/2005)

27190271400

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2005)

Page 2

Write or Type Committee Name

SCHAKOWSKY FOR CONGRESS

Report Covering the Period From ^{M M} 04 ^{D D} 01 ^{Y Y Y Y} 2008 To ^{V M} 08 ^{D D} 30 ^{Y Y Y Y} 2008

	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(a))	245526 01	991145 83
(b) Total Contribution Refunds (from Line 20(d))	250 00	1750 00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	245276 01	989395 83
7 Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	117245 87	647167 63
(b) Total Offsets to Operating Expenditures (from Line 14).....	0 00	3028 60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	117245 87	644139 03
8. Cash on Hand at Close of Reporting Period (from Line 27)	269367 50	
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	

For further information contact:

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

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

27190271401

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
SCHAKOWSKY FOR CONGRESS

Report Covering the Period From ^{M M} 0 4 ^{Y Y} 0 1 ^{Y Y} 2 0 0 8 To ^{M M} 0 8 ^{Y Y} 3 0 ^{Y Y} 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		
(i) Itemized (use Schedule A)	143925 00	554140 05
(ii) Unitemized	27876 01	174605 78
(iii) TOTAL of contributions from individuals	171801 01	728745 83
(b) Political Party Committees	0 00	250 00
(c) Other Political Committees (such as PACS)	73725 00	262150 00
(d) The Candidate	0 00	0 00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c) and (d))	245526 01	991145 83
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.)	0 00	3028 60
15 OTHER RECEIPTS (Dividends, Interest, etc.)	1005 45	6510 34
16 TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14 and 15) (Carry Total to Line 24, page 4)	246531 46	1000684 77

27190271402

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17 OPERATING EXPENDITURES	117245 87	647167 63
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	250 00	1750 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 20(a), (b), and (c))	250 00	1750 00
21 OTHER DISBURSEMENTS	77262 50	311699 36
22 TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21) ▶	194758 37	960616 99
III. CASH SUMMARY		
23 CASH ON HAND AT BEGINNING OF REPORTING PERIOD		217594 41
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)		246531 46
25 SUBTOTAL (add Line 23 and Line 24)		464125 87
26 TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		194758 37
27 CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		269367 50

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**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)
SCHAKOWSKY FOR CONGRESS

27190271404

Full Name (Last, First, Middle Initial) A. ADP		Transaction ID: SB17 10595 Date of Disbursement 04 " 05 " 2006	
Mailing Address 100 N Northwest Pt. Road		Amount of Each Disbursement this Period 58 88	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: House, Senate, President State District	Disbursement For: Primary, General, Other (specify)	Category/Type	

Full Name (Last, First, Middle Initial) B. ADP		Transaction ID: SB17 10594 Date of Disbursement 04 " 14 " 2006	
Mailing Address 100 N Northwest Pt. Road		Amount of Each Disbursement this Period 415 08	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: House, Senate, President State District	Disbursement For: Primary, General, Other (specify)	Category/Type	

Full Name (Last, First, Middle Initial) C. ADP		Transaction ID: SB17 10598 Date of Disbursement 04 " 19 " 2006	
Mailing Address 100 N Northwest Pt. Road		Amount of Each Disbursement this Period 65 88	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Service	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: House, Senate, President State District	Disbursement For: Primary, General, Other (specify)	Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶ 537.44

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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<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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial)

A ADP

Mailing Address 100 N Northwest Pt Road

City Elk Grove Village State IL Zip Code 80007

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.10593
Date of Disbursement

04 " " 27 " " 2006 "

Amount of Each Disbursement this Period

399.94

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last First, Middle Initial)

B. ADP

Mailing Address 100 N Northwest Pt Road

City Elk Grove Village State IL Zip Code 80007

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.10598
Date of Disbursement

05 " " 03 " " 2006 "

Amount of Each Disbursement this Period

56.68

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 N Northwest Pt Road

City Elk Grove Village State IL Zip Code 80007

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.10597
Date of Disbursement

05 " " 15 " " 2006 "

Amount of Each Disbursement this Period

399.94

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

856.56

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

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

Use separate schedule(s)
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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
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271406

A Full Name (Last First, Middle Initial) ADP Mailing Address 100 N Northwest Pt Road City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10592 Date of Disbursement 05 / 24 / 2006 Amount of Each Disbursement this Period 58 88 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
B Full Name (Last First, Middle Initial) ADP Mailing Address 100 N Northwest Pt Road City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10803 Date of Disbursement 06 / 01 / 2006 Amount of Each Disbursement this Period 399 94 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
C Full Name (Last First, Middle Initial) ADP Mailing Address 100 N Northwest Pt Road City Elk Grove Village State IL Zip Code 60007 Purpose of Disbursement Payroll Service Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10800 Date of Disbursement 06 / 07 / 2006 Amount of Each Disbursement this Period 58 88 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
SUBTOTAL of Disbursements This Page (optional) ▶		513.30
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
(check only one)

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17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271407

Full Name (Last First, Middle Initial) A. ADP		Transaction ID: SB17 10802 Date of Disbursement 06 " 15 " 2006	
Mailing Address 100 N Northwest Pt Road		Amount of Each Disbursement this Period 394 35	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Candidate Name		Category/ Type	
Office Sought House Senate President	Disbursement For Primary General Other (specify) ▼		
State District			

Full Name (Last First, Middle Initial) B. ADP		Transaction ID: SB17 10801 Date of Disbursement 06 " 21 " 2006	
Mailing Address 100 N Northwest Pt Road		Amount of Each Disbursement this Period 56 68	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Service	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Candidate Name		Category/ Type	
Office Sought House Senate President	Disbursement For Primary General Other (specify) ▼		
State District			

Full Name (Last, First, Middle Initial) C. ADP		Transaction ID: SB17 10599 Date of Disbursement 06 " 30 " 2006	
Mailing Address 100 N Northwest Pt Road		Amount of Each Disbursement this Period 394 34	
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Candidate Name		Category/ Type	
Office Sought House Senate President	Disbursement For Primary General Other (specify) ▼		
State District			

SUBTOTAL of Disbursements This Page (optional) ▶ **845.37**

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

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

Use separate schedule(s)
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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
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

<p>A Full Name (Last, First, Middle Initial) AIDS Foundation of Chicago</p> <p>Mailing Address 411 S Wells</p> <p>City Chicago State IL Zip Code 60607</p> <p>Purpose of Disbursement Event Tickets</p> <p>Candidate Name</p> <p>Office Sought House Senate President Disbursement For Primary General Other (specify) ▼</p> <p>State District</p>	<p>Transaction ID: SB17 10604 Date of Disbursement 04 " " 11 " " 2006</p> <p>Amount of Each Disbursement this Period 700 00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>B Full Name (Last, First, Middle Initial) Ameritech</p> <p>Mailing Address PO Box 4520</p> <p>City Carol Stream State IL Zip Code 60107</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought House Senate President Disbursement For Primary General Other (specify) ▼</p> <p>State District</p>	<p>Transaction ID: SB17 10808 Date of Disbursement 04 " " 07 " " 2006</p> <p>Amount of Each Disbursement this Period 371 55</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>C Full Name (Last, First, Middle Initial) Ameritech</p> <p>Mailing Address PO Box 4520</p> <p>City Carol Stream State IL Zip Code 60107</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought House Senate President Disbursement For Primary General Other (specify) ▼</p> <p>State District</p>	<p>Transaction ID: SB17 10807 Date of Disbursement 05 " " 08 " " 2006</p> <p>Amount of Each Disbursement this Period 418 81</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 1490.16</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

27190271408

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

Use separate schedule(s)
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FOR LINE NUMBER
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271409

A Full Name (Last, First, Middle Initial) Ameritech Mailing Address PO Box 4520 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Telephone Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10609 Date of Disbursement 06 " 05 ' 2006 Amount of Each Disbursement this Period 399.39 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
B Full Name (Last, First, Middle Initial) Armour, Alex Mailing Address 4713 Port Clinton City Highland Park State IL Zip Code 60635 Purpose of Disbursement Salary Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10813 Date of Disbursement 04 " 14 ' 2006 Amount of Each Disbursement this Period 1604.16 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
C Full Name (Last, First, Middle Initial) Armour, Alex Mailing Address 4713 Port Clinton City Highland Park State IL Zip Code 60635 Purpose of Disbursement Salary Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10615 Date of Disbursement 04 " 27 ' 2006 Amount of Each Disbursement this Period 1604.16 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
SUBTOTAL of Disbursements This Page (optional) ▶		3607.71
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
(check only one)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Armour, Alex

Mailing Address 4713 Port Clinton

City Highland Park State IL Zip Code 60835

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB17 10811
Date of Disbursement

05 " 15 " 2006 "

Amount of Each Disbursement this Period

1604 16

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Armour, Alex

Mailing Address 4713 Port Clinton

City Highland Park State IL Zip Code 60835

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB17 10812
Date of Disbursement

06 " 01 " 2006 "

Amount of Each Disbursement this Period

1604 16

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Armour, Alex

Mailing Address 4713 Port Clinton

City Highland Park State IL Zip Code 60835

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB17 10814
Date of Disbursement

06 " 15 " 2006 "

Amount of Each Disbursement this Period

1604 16

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

4812.48

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

27190271410

**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)
SCHAKOWSKY FOR CONGRESS

27199271411

Full Name (Last, First, Middle Initial) A. Armour, Alex		Transaction ID: SB17 1061D Date of Disbursement 06 " 30 " 2006	
Mailing Address 4713 Port Clinton		Amount of Each Disbursement this Period 1604.16	
City Highland Park State IL Zip Code 60635	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Purpose of Disbursement Salary Candidate Name			
Office Sought House Senate President State District	Disbursement For Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: SB17 1081B Date of Disbursement 04 " 07 " 2006	
Mailing Address PO Box 27-866		Amount of Each Disbursement this Period 207.05	
City Kansas City State MO Zip Code 64184	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Purpose of Disbursement Telephone Candidate Name			
Office Sought House Senate President State District	Disbursement For Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: SB17 1081B Date of Disbursement 04 " 18 " 2006	
Mailing Address PO Box 27-866		Amount of Each Disbursement this Period 25.32	
City Kansas City State MO Zip Code 64184	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Purpose of Disbursement Telephone Candidate Name			
Office Sought House Senate President State District	Disbursement For Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶ 1836.53

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271412

<p>A Full Name (Last First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 27-866</p> <p>City Kansas City State MO Zip Code 64184</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Office Sought</td> <td style="width: 10%;">House Senate President</td> <td style="width: 10%;">Disbursement For</td> <td style="width: 10%;">Primary</td> <td style="width: 10%;">General</td> <td rowspan="2" style="width: 10%; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>State</td> <td>District</td> <td>Other (specify) ▼</td> <td colspan="2"></td> </tr> </table>	Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type	State	District	Other (specify) ▼			<p>Transaction ID: SB17.1062D Date of Disbursement 05 " 08 " 2006</p> <p>Amount of Each Disbursement this Period 185.07</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type							
State	District	Other (specify) ▼										
<p>B Full Name (Last First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 27-866</p> <p>City Kansas City State MO Zip Code 64184</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Office Sought</td> <td style="width: 10%;">House Senate President</td> <td style="width: 10%;">Disbursement For</td> <td style="width: 10%;">Primary</td> <td style="width: 10%;">General</td> <td rowspan="2" style="width: 10%; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>State</td> <td>District</td> <td>Other (specify) ▼</td> <td colspan="2"></td> </tr> </table>	Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type	State	District	Other (specify) ▼			<p>Transaction ID: SB17.10617 Date of Disbursement 08 " 05 " 2006</p> <p>Amount of Each Disbursement this Period 130.53</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type							
State	District	Other (specify) ▼										
<p>C Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 27-866</p> <p>City Kansas City State MO Zip Code 64184</p> <p>Purpose of Disbursement Telephone Service</p> <p>Candidate Name</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Office Sought</td> <td style="width: 10%;">House Senate President</td> <td style="width: 10%;">Disbursement For</td> <td style="width: 10%;">Primary</td> <td style="width: 10%;">General</td> <td rowspan="2" style="width: 10%; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>State</td> <td>District</td> <td>Other (specify) ▼</td> <td colspan="2"></td> </tr> </table>	Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type	State	District	Other (specify) ▼			<p>Transaction ID: SB17.10619 Date of Disbursement 08 " 22 " 2006</p> <p>Amount of Each Disbursement this Period 10.50</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
Office Sought	House Senate President	Disbursement For	Primary	General	Category/ Type							
State	District	Other (specify) ▼										
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>		335.10										
<p>TOTAL This Period (last page this line number only) ▶</p>												

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

Use separate schedule(s)
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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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A AT&T Wireless

Mailing Address PO Box 27-866

City Kansas City State MO Zip Code 64184

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17.10621
Date of Disbursement

05 " 01 " 2006 "

Amount of Each Disbursement this Period

253.86

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. Bank One

Mailing Address PO Box 53084

City Atlanta State GA Zip Code 30353

Purpose of Disbursement
Itemization Attached

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10478
Date of Disbursement

04 " 11 " 2006 "

Amount of Each Disbursement this Period

6122.77

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Dominicks

Mailing Address 6312 Nagle Avenue

City Chicago State IL Zip Code 60646

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10478 0
Date of Disbursement

04 " 11 " 2006 "

Amount of Each Disbursement this Period

4.36

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional) ▶

5376.63

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

27190271413

**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 141 / 180	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

27190271414

A. Full Name (Last, First, Middle Initial) Hyatt Regency Chicago Mailing Address 161 E Wacker Drive City Chicago State IL Zip Code 60601 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼			Transaction ID: SB17 10476 2 Date of Disbursement 04 " " 11 " " 2006 Amount of Each Disbursement this Period 34.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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B. Full Name (Last, First, Middle Initial) Postmaster of Evanston Mailing Address 1101 Davis City Evanston State IL Zip Code 60201 Purpose of Disbursement Postage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼			Transaction ID: SB17 10476 4 Date of Disbursement 04 " " 11 " " 2006 Amount of Each Disbursement this Period 1236.12 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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C. Full Name (Last, First, Middle Initial) Cingular Wireless Mailing Address 5585 Glenridge Connector City Atlanta State GA Zip Code 30342 Purpose of Disbursement Equipment Rental Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼			Transaction ID: SB17 10476 5 Date of Disbursement 04 " " 11 " " 2006 Amount of Each Disbursement this Period 85.38 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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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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17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Federal Express

Mailing Address P O Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17.10476 12
Date of Disbursement

04 " " 11 " " 2006 "

Amount of Each Disbursement this Period

37.42

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B Fire House Grill

Mailing Address 750 Chicago Avenue

City Evanston State IL Zip Code 60202

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10476 18
Date of Disbursement

04 " " 11 " " 2006 "

Amount of Each Disbursement this Period

45.61

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C Chicago Cubs

Mailing Address 1080 W Addison

City Chicago State IL Zip Code 60613

Purpose of Disbursement
Tickets for Event

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10476 19
Date of Disbursement

04 " " 11 " " 2006 "

Amount of Each Disbursement this Period

1070.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

27190271416

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271417

A Full Name (Last, First, Middle Initial) Amtrak Mailing Address 50 Massachusetts Avenue NW City Washington State DC Zip Code 20001 Purpose of Disbursement Travel Expenses Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10476 21 Date of Disbursement 04 " 11 " 2006 Amount of Each Disbursement this Period 336 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) U S House of Representatives Mailing Address The Capitol City Washington State DC Zip Code 20515 Purpose of Disbursement Office Supplies Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10476 22 Date of Disbursement 04 " 11 " 2006 Amount of Each Disbursement this Period 65 71 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Bienville House Hotel Mailing Address 320 Decatur Street City New Orleans State LA Zip Code 70130 Purpose of Disbursement Travel Expenses Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10476 23 Date of Disbursement 04 " 11 " 2006 Amount of Each Disbursement this Period 151 29 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271418

A Full Name (Last, First, Middle Initial) Jewel Osco Mailing Address 1128 Chicago Avenue City Evanston State IL Zip Code 60202 Purpose of Disbursement Food & Beverage Candidate Name _____ Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type _____		Transaction ID: SB17 10476 25 Date of Disbursement 04 " ' 11 ' 2006 Amount of Each Disbursement this Period 45 90 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Allan Woods Flowers Mailing Address 2645 Connecticut Avenue NW City Washington State DC Zip Code 20008 Purpose of Disbursement Flowers Candidate Name _____ Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type _____		Transaction ID: SB17 10476 26 Date of Disbursement 04 " ' 11 ' 2006 Amount of Each Disbursement this Period 94 60 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Bank One Mailing Address PO Box 53084 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Itemization Attached Candidate Name _____ Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type _____		Transaction ID: SB17 10514 Date of Disbursement 05 " ' 11 ' 2006 Amount of Each Disbursement this Period 2514 16 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
SUBTOTAL of Disbursements This Page (optional) ▶		2514.16
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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Allied Printing

Mailing Address 5540 N Broadway

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Printing

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17.10514 0
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

29 67

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B Office Depot

Mailing Address 1916 Dempster

City Evanston State IL Zip Code 60202

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10514 1
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

43 36

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C Office Max

Mailing Address 1633 Chicago Avenue

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10514 2
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

6 51

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

27190271419

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last First, Middle Initial) Hilton Chicago Mailing Address 720 S Michigan City Chicago State IL Zip Code 60605 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10514 3 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 149 07 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
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B. Full Name (Last First, Middle Initial) Postmaster of Evanston Mailing Address 1101 Davis City Evanston State IL Zip Code 60201 Purpose of Disbursement Postage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10514 4 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 105 19 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
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C. Full Name (Last First, Middle Initial) Francesca's Bryn Mawr Mailing Address 1039 W Bryn Mawr City Chicago State IL Zip Code 60680 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10514 5 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 88 28 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

27190271420

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER
(check only one)

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<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271421

A Full Name (Last, First, Middle Initial) Federal Express Mailing Address P O Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10514 8 Date of Disbursement 05 " 11 ' 2006 Amount of Each Disbursement this Period 20.05 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 [MEMO ITEM]
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B. Full Name (Last, First, Middle Initial) General Park Mailing Address 112 N Clark Street City Chicago State IL Zip Code 60602 Purpose of Disbursement Parking Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10514 9 Date of Disbursement 05 " 11 ' 2006 Amount of Each Disbursement this Period 14.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 [MEMO ITEM]
--	--	--

C. Full Name (Last, First, Middle Initial) J2 Efax Service Mailing Address 6922 Hollywood Blvd , 5th Floor City Los Angeles State CA Zip Code 90028 Purpose of Disbursement Fax Service Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10514 10 Date of Disbursement 05 " 11 ' 2006 Amount of Each Disbursement this Period 12.95 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 [MEMO ITEM]
--	--	---

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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Central Park

Mailing Address 3140 N Central Avenue

City Chicago State IL Zip Code 60634

Purpose of Disbursement
Parking

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10514 15
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

13.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Sprint PCS

Mailing Address P O Box 219554

City Kansas City State KS Zip Code 64121

Purpose of Disbursement
Telephone

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10514 18
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

36.07

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address 5585 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone Equipment

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10514 19
Date of Disbursement

05 " 11 " 2006 "

Amount of Each Disbursement this Period

81.73

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

27190271422

**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 150 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last, First, Middle Initial) Athena Mailing Address 212 S Halstad Street City Chicago State IL Zip Code 60601 Purpose of Disbursement Catering Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10514 20 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 426 70 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Calo Restaurant Mailing Address 5343 N Clark City Chicago State IL Zip Code 60640 Purpose of Disbursement Catering Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10514 21 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 400 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) United Airlines Mailing Address P O Box 66100 City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel Expenses Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10514 24 Date of Disbursement 05 " 11 " 2006 Amount of Each Disbursement this Period 436 36 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

27190271423

**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 151 / 180

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial)

A. Bank One

Mailing Address PO Box 53084

City Atlanta State GA Zip Code 30353

Purpose of Disbursement
Itemization Attached

Candidate Name

Office Sought House Senate President State District
Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10557
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

2403.14

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last First, Middle Initial)

B. Federal Express

Mailing Address P O Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping

Candidate Name

Office Sought House Senate President State District
Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10557 0
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

167.10

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last First, Middle Initial)

C. East Bank Club

Mailing Address 500 N Kingsbury

City Chicago State IL Zip Code 60610

Purpose of Disbursement
Catering

Candidate Name

Office Sought House Senate President State District
Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10557 1
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

637.43

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2403.14

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

27190271424

**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 152 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last First, Middle Initial) Postmaster of Evanston Mailing Address 1101 Davis City Evanston State IL Zip Code 60201 Purpose of Disbursement Postage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10557 2 Date of Disbursement 06 " 12 " 2006 Amount of Each Disbursement this Period 351 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
B. Full Name (Last First, Middle Initial) Pompei Bakery Mailing Address 2955 N Sheffield Avenue City Chicago State IL Zip Code 60657 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10557 3 Date of Disbursement 08 " 12 " 2006 Amount of Each Disbursement this Period 529 61 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Lucky Platter Restaurant Mailing Address 514 Main Street City Evanston State IL Zip Code 60202 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10557 7 Date of Disbursement 06 " 12 " 2006 Amount of Each Disbursement this Period 25 86 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶		0.00
TOTAL This Period (last page this line number only) ▶		

27190271425

**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 153 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A J2 Efax Service

Mailing Address 6922 Hollywood Blvd, 5th Floor

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement
Fax Service

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10557 9
Date of Disbursement

06 " ' 12 ' ' 2006 "

Amount of Each Disbursement this Period

12.95

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B Fire House Grill

Mailing Address 750 Chicago Avenue

City Evanston State IL Zip Code 60202

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10557 11
Date of Disbursement

06 " ' 12 ' ' 2006 "

Amount of Each Disbursement this Period

27.90

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C Moretti's

Mailing Address 6727 N Dimsted Avenue

City Chicago State IL Zip Code 60631

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10557 14
Date of Disbursement

06 " ' 12 ' ' 2006 "

Amount of Each Disbursement this Period

66.46

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

27190271426

**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 154 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Cingular Wireless

Mailing Address 5585 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10557 15
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

109.55

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Standard Park

Mailing Address 203 N La Salle Street

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Parking

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10557 17
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

96.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hilton Chicago

Mailing Address 720 S Michigan

City Chicago State IL Zip Code 60605

Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary	General
State	District	Other (specify) ▼		

Category/
Type

Transaction ID: SB17 10557 18
Date of Disbursement

06 " 12 " 2006 "

Amount of Each Disbursement this Period

22.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

27190271427

**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 155 / 180
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last First, Middle Initial) Al's Pizza Mailing Address 1328 E Capitol Street NE City Washington State DC Zip Code 20003 Purpose of Disbursement Food & Beverage Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10557 19 Date of Disbursement 06 / 12 / 2006 Amount of Each Disbursement this Period 167.84 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 [MEMO ITEM]
---	--	--

B. Full Name (Last First, Middle Initial) General Park Mailing Address 112 N Clark Street City Chicago State IL Zip Code 60602 Purpose of Disbursement Parking Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10557 20 Date of Disbursement 06 / 12 / 2006 Amount of Each Disbursement this Period 20.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 [MEMO ITEM]
---	--	---

C. Full Name (Last First, Middle Initial) Bank One Mailing Address PO Box 53084 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Food & Beverage (Unitemized) Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17 10624 Date of Disbursement 06 / 13 / 2006 Amount of Each Disbursement this Period 28.97 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
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SUBTOTAL of Disbursements This Page (optional)		28.97
TOTAL This Period (last page this line number only)		

27190271428

**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 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271429

A Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of IL Mailing Address PO Box 1364 City Chicago State IL Zip Code 60690 Purpose of Disbursement Health Insurance Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10826 Date of Disbursement 04 ' 11 ' 2006 Amount of Each Disbursement this Period 525 88 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
B. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of IL Mailing Address PO Box 1364 City Chicago State IL Zip Code 60690 Purpose of Disbursement Health Insurance Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10825 Date of Disbursement 08 ' 09 ' 2006 Amount of Each Disbursement this Period 570 06 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
C. Full Name (Last, First, Middle Initial) Broadway 55 LLC Mailing Address 38 W Rudolf #800 City Chicago State IL Zip Code 60601 Purpose of Disbursement Rent Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/ Type		Transaction ID: SB17 10827 Date of Disbursement 04 ' 05 ' 2006 Amount of Each Disbursement this Period 1200 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
SUBTOTAL of Disbursements This Page (optional)		2295.94
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)				PAGE 157 / 180
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

27190271A30

A Full Name (Last First, Middle Initial) Centro Romero Mailing Address 6216 N Clark St City Chicago State IL Zip Code 60660 Purpose of Disbursement Advertisment Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10828 Date of Disbursement 04 / 26 / 2006 Amount of Each Disbursement this Period 250.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---	--	---

B. Full Name (Last First, Middle Initial) Cingular Wireless Mailing Address 5565 Glenridge Connector City Atlanta State GA Zip Code 30342 Purpose of Disbursement Telephone Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10831 Date of Disbursement 04 / 27 / 2006 Amount of Each Disbursement this Period 122.18 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	---

C. Full Name (Last First, Middle Initial) Cingular Wireless Mailing Address 5565 Glenridge Connector City Atlanta State GA Zip Code 30342 Purpose of Disbursement Telephone Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10832 Date of Disbursement 05 / 03 / 2006 Amount of Each Disbursement this Period 15.83 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional)	387.81
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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Cingular Wireless

Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10635
Date of Disbursement

06 " 09 ' 2006 ' y

Amount of Each Disbursement this Period

301.02

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10635
Date of Disbursement

06 " 30 ' 2006 ' y

Amount of Each Disbursement this Period

120.39

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10634
Date of Disbursement

06 " 05 ' 2006 ' y

Amount of Each Disbursement this Period

141.39

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

562.80

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

27190271431

**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 159 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Cingular Wireless

Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼
State	District	

Category/
Type

Transaction ID: SB17 10633
Date of Disbursement

06 " 08 " 2006 "

Amount of Each Disbursement this Period

281 05

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Telephone

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼
State	District	

Category/
Type

Transaction ID: SB17 10637
Date of Disbursement

06 " 08 " 2006 "

Amount of Each Disbursement this Period

124 63

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Citizens for Carol Roman

Mailing Address 5538 North Broadway Avenue

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼
State	District	

Category/
Type

Transaction ID: SB17 10638
Date of Disbursement

04 " 08 " 2006 "

Amount of Each Disbursement this Period

125 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

530.68

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

27190271432

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A CURE-Citizens United for Research in Epilepsy

Mailing Address 505 North Lake Shore Dr #4605

City Chicago State IL Zip Code 60611

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.1064D
Date of Disbursement

04 " 11 " 2006 "

Amount of Each Disbursement this Period

600.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. Diamond Marketing Solutions

Mailing Address 280 Madsen Drive

City Bloomington State IL Zip Code 60108

Purpose of Disbursement
Mailing Expenses

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.10645
Date of Disbursement

05 " 17 " 2006 "

Amount of Each Disbursement this Period

2893.82

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Gay Games VII

Mailing Address 4753 N Broadway #802

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17.10651
Date of Disbursement

06 " 06 " 2006 "

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3893.82

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

27190271433

**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 151 / 180	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

27190271434

A Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3909 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type			Transaction ID: SB17 10652 Date of Disbursement 04 / 14 / 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
--	--	--	---

B. Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3909 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type			Transaction ID: SB17 10654 Date of Disbursement 04 / 27 / 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
---	--	--	---

C. Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3909 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼ Category/Type			Transaction ID: SB17 10653 Date of Disbursement 05 / 15 / 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
---	--	--	---

SUBTOTAL of Disbursements This Page (optional) ▶	8250.00
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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

27190271435

A Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3908 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10657 Date of Disbursement 06 " 01 " 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
--	--	---

B. Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3908 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10658 Date of Disbursement 06 " 15 " 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
---	--	---

C. Full Name (Last, First, Middle Initial) Gersten, Sarah Mailing Address 3908 N Shendan #1H City Chicago State IL Zip Code 60613 Purpose of Disbursement Salary Candidate Name Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10655 Date of Disbursement 06 " 30 " 2006 Amount of Each Disbursement this Period 2750.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶ 8250.00

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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271436

A Full Name (Last First, Middle Initial) Heartland Alliance Mailing Address 208 S La Salle City Chicago State IL Zip Code 60604 Purpose of Disbursement Event Tickets Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10658 Date of Disbursement 05 " 04 " 2006 Amount of Each Disbursement this Period 125 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
B. Full Name (Last First, Middle Initial) Hilton Chicago Mailing Address 720 S Michigan City Chicago State IL Zip Code 60605 Purpose of Disbursement Catering Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10660 Date of Disbursement 04 " 26 " 2006 Amount of Each Disbursement this Period 47397 86 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
C. Full Name (Last First, Middle Initial) Hilton Chicago Mailing Address 720 S Michigan City Chicago State IL Zip Code 60605 Purpose of Disbursement Catering Candidate Name Office Sought House Senate President Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10659 Date of Disbursement 05 " 08 " 2006 Amount of Each Disbursement this Period 535 81 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
SUBTOTAL of Disbursements This Page (optional) ▶		48058.47
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)

PAGE 154 / 180

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial)

A. Ixa

Mailing Address 1630 Chicago Ave

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Flowers

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 1068B
Date of Disbursement

04 " " 21 " " 2006 "

Amount of Each Disbursement this Period

65 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last First, Middle Initial)

B. Ixa

Mailing Address 1630 Chicago Ave

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Flowers

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 1068B
Date of Disbursement

05 " " 03 " " 2006 "

Amount of Each Disbursement this Period

58 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last First, Middle Initial)

C. Ixa

Mailing Address 1630 Chicago Ave

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Flowers

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10667
Date of Disbursement

05 " " 11 " " 2006 "

Amount of Each Disbursement this Period

2433 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

2556.00

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

27190271437

**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 165 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last, First, Middle Initial) Ixa Mailing Address 1630 Chicago Ave City Evanston State IL Zip Code 60201 Purpose of Disbursement Flowers Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17.10685 Date of Disbursement 06 " 05 " 2006 Amount of Each Disbursement this Period 58.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
--	--	---

B. Full Name (Last, First, Middle Initial) La Prairie, Dean Mailing Address 4453 N Paulina City Chicago State IL Zip Code 60640 Purpose of Disbursement Photography Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17.10872 Date of Disbursement 05 " 02 " 2006 Amount of Each Disbursement this Period 325.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
---	--	--

C. Full Name (Last, First, Middle Initial) LSG Strategies Services Corp Mailing Address 2120 L St, NW #305 City Washington State DC Zip Code 20037 Purpose of Disbursement Phone Bank Candidate Name Office Sought House Senate President State District Disbursement For Primary General Other (specify)		Transaction ID: SB17.10874 Date of Disbursement 04 " 16 " 2006 Amount of Each Disbursement this Period 2486.72 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶ 2869.72

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

27190271438

**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 165 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial)

A Mid-City Printing

Mailing Address 5526 W Montrose

City Chicago State IL Zip Code 60641

Purpose of Disbursement
Printing

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10878
Date of Disbursement

04 " 26 " 2006 "

Amount of Each Disbursement this Period

1320 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last First, Middle Initial)

B Mid-City Printing

Mailing Address 5526 W Montrose

City Chicago State IL Zip Code 60641

Purpose of Disbursement
Printing

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10877
Date of Disbursement

05 " 01 " 2006 "

Amount of Each Disbursement this Period

686 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last First, Middle Initial)

C Mid-City Printing

Mailing Address 5526 W Montrose

City Chicago State IL Zip Code 60641

Purpose of Disbursement
Printing

Candidate Name

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Category/
Type

Transaction ID: SB17 10876
Date of Disbursement

05 " 17 " 2006 "

Amount of Each Disbursement this Period

1314 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

3320.00

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

27190271439

**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 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271440

A Full Name (Last First, Middle Initial) Mid-City Printing Mailing Address 5526 W Montrose City Chicago State IL Zip Code 60641 Purpose of Disbursement Printing Candidate Name _____ Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10875 Date of Disbursement 05 " 18 " 2006 Amount of Each Disbursement this Period 360.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
B. Full Name (Last First, Middle Initial) Mid-City Printing Mailing Address 5526 W Montrose City Chicago State IL Zip Code 60641 Purpose of Disbursement Printing Candidate Name _____ Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10879 Date of Disbursement 06 " 26 " 2006 Amount of Each Disbursement this Period 444.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
C. Full Name (Last First, Middle Initial) Mid-City Printing Mailing Address 5526 W Montrose City Chicago State IL Zip Code 60641 Purpose of Disbursement Printing Candidate Name _____ Office Sought House Senate Disbursement For Primary General Other (specify) ▼ State District		Transaction ID: SB17 10880 Date of Disbursement 06 " 26 " 2006 Amount of Each Disbursement this Period 1418.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
SUBTOTAL of Disbursements This Page (optional) ▶		2222.00
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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial)
A Mikva Challenge Grant Foundation
Mailing Address 25 E Washington

City Chicago State IL Zip Code 60602

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought House Senate President
Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10682
Date of Disbursement
06 " 13 " 2006

Amount of Each Disbursement this Period
150.00
Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last First, Middle Initial)
B. Moneris

Mailing Address 700 E Lake Cook Road

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought House Senate President
Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10686
Date of Disbursement
04 " 04 " 2006

Amount of Each Disbursement this Period
430.79
Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)
C. Moneris

Mailing Address 700 E Lake Cook Road

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought House Senate President
Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10687
Date of Disbursement
04 " 04 " 2006

Amount of Each Disbursement this Period
36.95
Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

617.74

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

27190271441

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Moneris

Mailing Address 700 E Lake Cook Road

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Transaction ID: SB17 10883
Date of Disbursement

05 " 03 ' 2006 ' Y

Amount of Each Disbursement this Period

1085 22

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Moneris

Mailing Address 700 E Lake Cook Road

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Transaction ID: SB17 10884
Date of Disbursement

05 " 03 ' 2006 ' Y

Amount of Each Disbursement this Period

36 95

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Moneris

Mailing Address 700 E Lake Cook Road

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought	House Senate President	Disbursement For	Primary General Other (specify) ▼
State	District		

Transaction ID: SB17 10885
Date of Disbursement

06 " 05 ' 2006 ' Y

Amount of Each Disbursement this Period

293 85

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

1416.02

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

27190271442

**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 170 / 180

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Morton Grove Chamber of Commerce

Mailing Address 6101 Capilina

City Morton Grove State IL Zip Code 60053

Purpose of Disbursement
Membership Dues

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 1068B
Date of Disbursement

05 " 18 " 2006 "

Amount of Each Disbursement this Period

75.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. Reyna, Fernando

Mailing Address 1915 W Summerdale

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Office Cleaning

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10895
Date of Disbursement

04 " 05 " 2006 "

Amount of Each Disbursement this Period

140.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Sprint PCS

Mailing Address P O Box 219554

City Kansas City State KS Zip Code 64121

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10897
Date of Disbursement

04 " 16 " 2006 "

Amount of Each Disbursement this Period

174.94

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

389.94

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

27190271443

**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 171 / 180

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Sprint PCS

Mailing Address P O Box 219554

City Kansas City State KS Zip Code 64121

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10699
Date of Disbursement

06 " 09 " 2006 "

Amount of Each Disbursement this Period

176 27

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Sprint PCS

Mailing Address P O Box 219554

City Kansas City State KS Zip Code 64121

Purpose of Disbursement
Telephone

Candidate Name

Office Sought House Senate Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10698
Date of Disbursement

06 " 15 " 2006 "

Amount of Each Disbursement this Period

182 64

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Turte Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought House Senate Disbursement For Primary General Other (specify) ▼
State District

Category/
Type

Transaction ID: SB17 10706
Date of Disbursement

04 " 14 " 2006 "

Amount of Each Disbursement this Period

700 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

1058.91

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

27190271444

**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
	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17.10701
Date of Disbursement

04 " 27 " 2006 "

Amount of Each Disbursement this Period

700 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10704
Date of Disbursement

05 " 15 " 2006 "

Amount of Each Disbursement this Period

700 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Parade Supplies

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Category/
Type

Transaction ID: SB17 10703
Date of Disbursement

05 " 30 " 2006 "

Amount of Each Disbursement this Period

430 98

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

1830.98

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

27190271445

**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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼	Category/ Type
State	District		

Transaction ID: SB17 10705
Date of Disbursement

06 " 01 " 2006 "

Amount of Each Disbursement this Period

700.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼	Category/ Type
State	District		

Transaction ID: SB17 10702
Date of Disbursement

06 " 15 " 2006 "

Amount of Each Disbursement this Period

700.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Tute, Jacque

Mailing Address 2212 W Palmer

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Salary

Candidate Name

Office Sought	House Senate President	Disbursement For Primary General Other (specify) ▼	Category/ Type
State	District		

Transaction ID: SB17 10700
Date of Disbursement

06 " 30 " 2006 "

Amount of Each Disbursement this Period

700.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2100.00

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

27190271446

**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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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last First, Middle Initial) A Washington Mutual		Transaction ID: SB17.10709 Date of Disbursement 04 " " 12 " " 2006	
Mailing Address 1201 3rd Avenue		Amount of Each Disbursement this Period 77.65	
City Seattle	State WA	Zip Code 98101	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53
Purpose of Disbursement Food & Beverage (Unitemized)		Category/ Type	
Candidate Name			
Office Sought State	House Senate President District	Disbursement For Primary General Other (specify) ▼	

27190271447

SUBTOTAL of Disbursements This Page (optional) ▶ 77.65

TOTAL This Period (last page this line number only) ▶ 115846.03

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Access Living

Mailing Address 310 S Peoria

City Chicago State IL Zip Code 60607

Purpose of Disbursement
Donation

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB21 1071D
Date of Disbursement

06 " 07 " 2006 "

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. ARCURI FOR CONGRESS

Mailing Address 2617 CRESTWAY

City UTICA State NY Zip Code 13501

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL ANGELO ARCURI

Office Sought x House Senate President
State NY District 24 Disbursement For X Primary General Other (specify) ▼

Transaction ID: SB21 10712
Date of Disbursement

06 " 29 " 2006 "

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. Asian American Institute

Mailing Address 4753 North Broadway St #804

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Donation

Candidate Name

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB21 10713
Date of Disbursement

04 " 24 " 2006 "

Amount of Each Disbursement this Period

170.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2470.00

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

27190271448

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BETTY SUTTON FOR CONGRESS

Mailing Address 1700 W MARKET ST #155

City AKRON State OH Zip Code 44313

Purpose of Disbursement
Contribution

Candidate Name
BETTY SUTTON

Office Sought House Senate President
Disbursement For 2006
 Primary General Other (specify) ▼
State OH District 13

Category/
Type

Transaction ID: SB21.10716
Date of Disbursement

04 " 15 " 2006 "

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

B. BETTY SUTTON FOR CONGRESS

Mailing Address 1700 W MARKET ST #155

City AKRON State OH Zip Code 44313

Purpose of Disbursement
Contribution

Candidate Name
BETTY SUTTON

Office Sought House Senate President
Disbursement For 2006
Primary General Other (specify) ▼
State OH District 13

Category/
Type

Transaction ID: SB21 10715
Date of Disbursement

08 " 26 " 2006 "

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)

C. CARNEY FOR CONGRESS

Mailing Address PO BOX 38

City DIMOCK State PA Zip Code 18816

Purpose of Disbursement
Contribution

Candidate Name
CHRISTOPHER P CARNEY

Office Sought House Senate President
Disbursement For 2006
Primary General Other (specify) ▼
State PA District 10

Category/
Type

Transaction ID: SB21 10720
Date of Disbursement

08 " 27 " 2006 "

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

27190271449

**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 18
20b 19a
20c 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Citizen Action Illinois

Mailing Address 28 E Jackson Blvd , #805

City Chicago State IL Zip Code 60604

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB21 10721
Date of Disbursement

06 " ' 20 " ' 2006 "

Amount of Each Disbursement this Period

2500 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. Citizens for Giannoulas

Mailing Address P O Box 8588

City Chicago State IL Zip Code 60680

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought House Senate President
State District Disbursement For Primary General Other (specify) ▼

Transaction ID: SB21 10723
Date of Disbursement

06 " ' 21 " ' 2006 "

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT CHRIS MURPHY

Mailing Address PO BOX 127

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
Contribution

Candidate Name
CHRISTOPHER SCOTT MURPHY

Category/
Type

Office Sought x House Senate President
State CT District 05 Disbursement For 2006 X Primary General Other (specify) ▼

Transaction ID: SB21 10725
Date of Disbursement

05 " ' 15 " ' 2006 "

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

27190271450

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

<p>A Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS</p> <p>Mailing Address 38 RISLEY ROAD</p> <p>City VERNON State CT Zip Code 06066</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOSEPH D COURTNEY</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President</p> <p>Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State CT District D2</p>		<p>Transaction ID: SB21 10727 Date of Disbursement 04 04 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>B Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS</p> <p>Mailing Address 38 RISLEY ROAD</p> <p>City VERNON State CT Zip Code 06066</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOSEPH D COURTNEY</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President</p> <p>Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State CT District D2</p>		<p>Transaction ID: SB21 10728 Date of Disbursement 05 15 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>C Full Name (Last, First, Middle Initial) CRANLEY FOR CONGRESS</p> <p>Mailing Address 37 W 7TH ST SUITE 804</p> <p>City CINCINNATI State OH Zip Code 45202</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOHN J IV CRANLEY</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President</p> <p>Disbursement For 2006 Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p> <p>State OH District 01</p>		<p>Transaction ID: SB21 10730 Date of Disbursement 06 09 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>		<p>3000.00</p>
<p>TOTAL This Period (last page this line number only) ▶</p>		

27190271451

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

<p>A Full Name (Last, First, Middle Initial) Dan Kotowski for State Senate</p> <p>Mailing Address P O Box 141</p> <p>City Park Ridge State IL Zip Code 60068</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought House Senate President State District</p> <p>Disbursement For Primary General Other (specify) ▼</p> <p>Category/ Type</p>	<p>Transaction ID: SB21 10731 Date of Disbursement 06 " 21 ' 2006 "</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>B Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS</p> <p>Mailing Address PO BOX 784</p> <p>City GLENVIEW State IL Zip Code 60025</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name DAN SEALS</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President State IL District 10</p> <p>Disbursement For 2006 Primary X General Other (specify) ▼</p> <p>Category/ Type</p>	<p>Transaction ID: SB21 10733 Date of Disbursement 06 " 30 ' 2006 "</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>C Full Name (Last, First, Middle Initial) DARCY BURNER FOR CONGRESS</p> <p>Mailing Address PO BOX 1090</p> <p>City CARNATION State WA Zip Code 98014</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name DARCY BURNER</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President State WA District 08</p> <p>Disbursement For 2006 X Primary General Other (specify) ▼</p> <p>Category/ Type</p>	<p>Transaction ID: SB21 10735 Date of Disbursement 06 " 09 ' 2006 "</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

27190271452

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee		Transaction ID: SB21.10736 Date of Disbursement 05 ' 16 ' 2006	
Mailing Address 430 S Capitol Street		Amount of Each Disbursement this Period 30000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement Transfer/Excess Campaign Funds Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Office Sought House Senate President	Disbursement For Primary General Other (specify) ▼	Category/ Type	
State District			

B. Full Name (Last, First, Middle Initial) ELLSWORTH FOR CONGRESS COMMITTEE		Transaction ID: SB21.10740 Date of Disbursement 05 ' 01 ' 2006	
Mailing Address PO BOX 62		Amount of Each Disbursement this Period 1000.00	
City EVANSVILLE State IN Zip Code 47708	Purpose of Disbursement Contribution Candidate Name BRAD ELLSWORTH	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Office Sought x House Senate President	Disbursement For X Primary General Other (specify) ▼	Category/ Type	
State IN District D8			

C. Full Name (Last, First, Middle Initial) Evanston-North Shore NAACP		Transaction ID: SB21.10741 Date of Disbursement 05 ' 10 ' 2006	
Mailing Address 1228 Emerson Street		Amount of Each Disbursement this Period 282.50	
City Evanston State IL Zip Code 60201	Purpose of Disbursement Donation Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53	
Office Sought House Senate President	Disbursement For Primary General Other (specify) ▼	Category/ Type	
State District			

SUBTOTAL of Disbursements This Page (optional) ▶ 31262.50

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

27190271453

**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 181 / 180
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A Fair Illinois

Mailing Address 3712 N Broadway

City Chicago State IL Zip Code 60613

Purpose of Disbursement Contribution

Candidate Name

Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB21 10743
Date of Disbursement

06 " 05 ' 2006 ' y

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. FARRELL FOR CONGRESS

Mailing Address P O Box 5136

City Westport State CT Zip Code 06881

Purpose of Disbursement Contribution

Candidate Name DIANE GOSS FARRELL

Office Sought x House Senate President State CT District D4 Disbursement For 2006 X Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB21 10745
Date of Disbursement

06 " 15 ' 2006 ' y

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. Friends of Blagojevich

Mailing Address 1200 N Ashland Avenue #500

City Chicago State IL Zip Code 60602

Purpose of Disbursement Contribution

Candidate Name

Office Sought House Senate President State District Disbursement For Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB21 10749
Date of Disbursement

06 " 27 ' 2006 ' y

Amount of Each Disbursement this Period

2000 00

Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

27190271454

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

<p>A Full Name (Last, First, Middle Initial) FRIENDS OF CHARLIE WILSON</p> <p>Mailing Address 7 CADIZ PIKE</p> <p>City BRIDGEPORT State OH Zip Code 43912</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name CHARLES A JR WILSON</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State OH District D6</p>		<p>Transaction ID: SB21 10751</p> <p>Date of Disbursement 04 " ' 20 " ' 2006 "</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF NUSBAUM FOR CONGRESS</p> <p>Mailing Address PO Box 428</p> <p>City Green Bay State WI Zip Code 54305</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name NANCY JEAN NUSBAUM</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State WI District D6</p>		<p>Transaction ID: SB21 10753</p> <p>Date of Disbursement 06 " ' 05 " ' 2006 "</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF PHIL HARE</p> <p>Mailing Address PO BOX 4183</p> <p>City ROCK ISLAND State IL Zip Code 61204</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name PHILIP G HARE</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p> <p>State IL District 17</p>		<p>Transaction ID: SB21 10755</p> <p>Date of Disbursement 06 " ' 27 " ' 2006 "</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>		<p>4000.00</p>
<p>TOTAL This Period (last page this line number only) ▶</p>		

27190271455

**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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE
Suite 800

City AMHERST State OH Zip Code 44001

Purpose of Disbursement
Contribution

Candidate Name
SHERROD BROWN

Office Sought House Disbursement For 2006
 Senate Primary General
President Other (specify) ▼
State OH District 00

Category/
Type

Transaction ID: SB21 10757
Date of Disbursement

06 " " 16 " " 2006 "

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

B. FRIENDS OF TAMMY DUCKWORTH

Mailing Address 416 W 22ND ST

City LOMBARD State IL Zip Code 60148

Purpose of Disbursement
Contribution

Candidate Name
L TAMMY DUCKWORTH

Office Sought House Disbursement For 2006
Senate Primary General
President Other (specify) ▼
State IL District 08

Category/
Type

Transaction ID: SB21 10760
Date of Disbursement

05 " " 15 " " 2006 "

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

Full Name (Last, First, Middle Initial)

C. FRIENDS OF TAMMY DUCKWORTH

Mailing Address 416 W 22ND ST

City LOMBARD State IL Zip Code 60148

Purpose of Disbursement
Contribution

Candidate Name
L TAMMY DUCKWORTH

Office Sought House Disbursement For 2006
Senate Primary General
President Other (specify) ▼
State IL District 08

Category/
Type

Transaction ID: SB21 10759
Date of Disbursement

06 " " 05 " " 2006 "

Amount of Each Disbursement this Period

1000 00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400 53

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

27190271456

**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 184 / 180
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

27190271457

A Full Name (Last, First, Middle Initial) GILLIBRAND FOR CONGRESS Mailing Address P O Box 1279 City Hudson State NY Zip Code 12534 Purpose of Disbursement Contribution Candidate Name KIRSTEN E GILLIBRAND Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State NY District 20		Transaction ID: SB21 10762 Date of Disbursement 06 " 09 ' 2006 ' Amount of Each Disbursement this Period 1000 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
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B. Full Name (Last, First, Middle Initial) HAFEN FOR CONGRESS Mailing Address PO BOX 530666 City HENDERSON State NV Zip Code 89053 Purpose of Disbursement Contribution Candidate Name TESSA MICHELLE HAFEN Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State NV District 03		Transaction ID: SB21 10768 Date of Disbursement 06 " 09 ' 2006 ' Amount of Each Disbursement this Period 1000 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
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C. Full Name (Last, First, Middle Initial) HARRY MITCHELL FOR CONGRESS Mailing Address PO BOX 23748 City TEMPE State AZ Zip Code 85285 Purpose of Disbursement Contribution Candidate Name HARRY E MITCHELL Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State AZ District 05		Transaction ID: SB21 10770 Date of Disbursement 06 " 09 ' 2006 ' Amount of Each Disbursement this Period 1000 00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
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SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jewish United Fund		Transaction ID: SB21 10773 Date of Disbursement 06 " 20 " 2006	
Mailing Address One South Franklin St.		Amount of Each Disbursement this Period 250 00	
City Chicago State IL Zip Code 60606	Purpose of Disbursement Event Tickets Candidate Name	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Office Sought House Senate President State District			
Disbursement For Primary General Other (specify) ▼		Category/ Type	

Full Name (Last, First, Middle Initial) B. JILL DERBY FOR CONGRESS		Transaction ID: SB21 10775 Date of Disbursement 06 " 09 " 2006	
Mailing Address PO BOX 1901		Amount of Each Disbursement this Period 1000 00	
City MINDEN State NV Zip Code 89423	Purpose of Disbursement Contribution Candidate Name JILL T DERBY	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Office Sought <input checked="" type="checkbox"/> House Senate President State NV District D2			
Disbursement For X Primary General Other (specify) ▼		Category/ Type	

Full Name (Last, First, Middle Initial) C. KILROY FOR CONGRESS		Transaction ID: SB21 10777 Date of Disbursement 05 " 01 " 2006	
Mailing Address 829 HARRISON AVENUE SUITE 305		Amount of Each Disbursement this Period 1000 00	
City COLUMBUS State OH Zip Code 43215	Purpose of Disbursement Contribution Candidate Name MARY JO KILROY	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53	
Office Sought <input checked="" type="checkbox"/> House Senate President State OH District 15			
Disbursement For X Primary General Other (specify) ▼		Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶ 2250.00

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

27190271458

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271459

A Full Name (Last, First, Middle Initial) KILROY FOR CONGRESS		Transaction ID: SB21 1077B Date of Disbursement 06 " " 26 " " 2006	
Mailing Address 929 HARRISON AVENUE SUITE 305		Amount of Each Disbursement this Period 1000 00	
City COLUMBUS State OH Zip Code 43215	Purpose of Disbursement Contribution	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
Candidate Name MARY JO KILROY			
Office Sought <input checked="" type="checkbox"/> House Senate President State OH District 15	Disbursement For 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) LOIS MURPHY FOR CONGRESS		Transaction ID: SB21 1078D Date of Disbursement 05 " " 15 " " 2006	
Mailing Address P O Box 312		Amount of Each Disbursement this Period 1000 00	
City Narberth State PA Zip Code 19072	Purpose of Disbursement Contribution	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
Candidate Name LOIS MURPHY			
Office Sought <input checked="" type="checkbox"/> House Senate President State PA District D8	Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS		Transaction ID: SB21 1078E Date of Disbursement 05 " " 11 " " 2006	
Mailing Address PO BOX 175785		Amount of Each Disbursement this Period 1000 00	
City COVINGTON State KY Zip Code 41017	Purpose of Disbursement Contribution	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
Candidate Name KENNETH RAY LUCAS			
Office Sought <input checked="" type="checkbox"/> House Senate President State KY District 04	Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		3000.00	
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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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

A Full Name (Last, First, Middle Initial) MADRID FOR CONGRESS Mailing Address PO BOX 25626 City ALBUQUERQUE State NM Zip Code 87125 Purpose of Disbursement Contribution Candidate Name PATRICIA A MADRID Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State NM District D1		Transaction ID: SB21 10785 Date of Disbursement 05 " 15 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 Category/ Type
B. Full Name (Last, First, Middle Initial) MADRID FOR CONGRESS Mailing Address PO BOX 25626 City ALBUQUERQUE State NM Zip Code 87125 Purpose of Disbursement Contribution Candidate Name PATRICIA A MADRID Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary X General Other (specify) ▼ State NM District D1		Transaction ID: SB21 10784 Date of Disbursement 08 " 26 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 Category/ Type
C. Full Name (Last, First, Middle Initial) MOUL FOR CONGRESS COMMITTEE Mailing Address PO BOX 85445 City LINCOLN State NE Zip Code 68501 Purpose of Disbursement Contribution Candidate Name MAXINE B MOUL Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State NE District 01		Transaction ID: SB21 10788 Date of Disbursement 05 " 03 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400.53 Category/ Type
SUBTOTAL of Disbursements This Page (optional)		3000.00
TOTAL This Period (last page this line number only)		▶

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**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

27190271461

A Full Name (Last, First, Middle Initial) NIKKI TINKER FOR CONGRESS Mailing Address PO BOX 171285 City MEMPHIS State TN Zip Code 38187 Purpose of Disbursement Contribution Candidate Name NIKKI MICHELE TINKER Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State TN District 09		Transaction ID: SB21 10799 Date of Disbursement 06 " 26 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
B. Full Name (Last, First, Middle Initial) PAVICH FOR CONGRESS Mailing Address PO BOX 1203 City BEECHER State IL Zip Code 60401 Purpose of Disbursement Contribution Candidate Name JOHN JUSTIN PAVICH Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ State IL District 11		Transaction ID: SB21 10794 Date of Disbursement 06 " 13 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
C. Full Name (Last, First, Middle Initial) PHYLLIS BUSANSKY FOR CONGRESS Mailing Address 3811 SCHEFFLERA ROAD City TAMPA State FL Zip Code 33618 Purpose of Disbursement Contribution Candidate Name PHYLLIS H BUSANSKY Office Sought <input checked="" type="checkbox"/> House Senate President Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼ State FL District 09		Transaction ID: SB21 10718 Date of Disbursement 05 " 15 " 2006 Amount of Each Disbursement this Period 1000.00 Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53
SUBTOTAL of Disbursements This Page (optional)		3000.00
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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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

<p>A Full Name (Last, First, Middle Initial) STEVE FILSON FOR CONGRESS</p> <p>Mailing Address POST OFFICE BOX 2499</p> <p>City DANVILLE State CA Zip Code 94526</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name STEVE N FILSON</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President</p> <p>Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State CA District 11</p>	<p>Transaction ID: SB21 10747 Date of Disbursement 05 " 15 " 2006 "</p> <p>Amount of Each Disbursement this Period 1000 00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>B. Full Name (Last, First, Middle Initial) TRAUNER FOR CONGRESS</p> <p>Mailing Address P O Box 1154</p> <p>City Wilson State WY Zip Code 83014</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name GARY S TRAUNER</p> <p>Office Sought <input checked="" type="checkbox"/> House Senate President</p> <p>Disbursement For 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p> <p>State WY District D1</p>	<p>Transaction ID: SB21 10801 Date of Disbursement 05 " 18 " 2006 "</p> <p>Amount of Each Disbursement this Period 1000 00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>C. Full Name (Last, First, Middle Initial) Voters for Vinehout</p> <p>Mailing Address P O Box 1274</p> <p>City Eau Claire State WI Zip Code 54702</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought <input type="checkbox"/> House Senate President</p> <p>Disbursement For Primary General Other (specify) ▼</p> <p>State District</p>	<p>Transaction ID: SB21 10805 Date of Disbursement 06 " 26 " 2006 "</p> <p>Amount of Each Disbursement this Period 250 00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C F R 400 53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 2250.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

27190271462

**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 type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial)
A WELCH FOR CONGRESS

Mailing Address PO BOX 1086

City MONTPELIER State VT Zip Code 05801

Purpose of Disbursement
Contribution

Candidate Name
PETER WELCH

Office Sought House Senate President
Disbursement For 2006
 Primary General
Other (specify) ▼

State VT District D0

Category/
Type

Transaction ID: SB21 10807
Date of Disbursement

05 " " 15 " " 2006

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

Full Name (Last, First, Middle Initial)
B. WOOLSEY FOR CONGRESS

Mailing Address P O Box 750176

City Petaluma State CA Zip Code 04975

Purpose of Disbursement
Contribution

Candidate Name
LYNN C WOOLSEY

Office Sought House Senate President
Disbursement For 2006
 Primary General
Other (specify) ▼

State CA District D8

Category/
Type

Transaction ID: SB21 10809
Date of Disbursement

05 " " 18 " " 2006

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C F R 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

76232.50

27190271463