FORM		ITRIBUTIONS AND EXPENDITURES (PLEASE TYPE OR PRINT IN BLACK INK)	FOR OFFICE USE ONLY			
D-2	Semi-Annual Report  Non-Participation - Election Date:  Final Report  Amendment of Report Indicated Abore		STATE BOARD OF ELECTIONS  10 JUL 19 AH 10: 38			
Full name and complete mailing add Citizens for Mayor Gaulrapp 1559 W Lincoln Blvd Freeport, IL 61032-4633		ee:	POLITICAL COMMITTEE 14 L 14775			
	CHEC	CK IF ADDRESS CHANGE	IDENTIFICATION NO.			
Oloilo O6/30/10 REPOR	AVAILABLE AT THE NING OF THE RTING PERIOD:	RETURN TO: STATE BOARD OF ELECTIONS PO BOX 4187 SPRINGFIELD, IL 62708-4187	LOCAL POLITICAL COMMITTEES AND STATE AND LOCAL POLITICAL COMMITTEES RETURN ORIGINAL TO: STATE BOARD OF ELECTIONS AND A COPY TO EACH APPROPRIATE COUNTY CLERK.			
		AIGN DISCLOSURE" FOR				
COMPLETE 1-7 FOR PRE-ELI	ECTION REPORTS.		EXPENDITURES			
COMPLETE ALL SEC SEMI-ANNUAL AND FIN		Transfers Out:     a. Itemized (from Schedule     b. Not-Itemized				
SECTION A - RECEIPTS		7. Loans made:				
1. Individual Contributions:		a. Itemized (from Schedule	· B) \$ (7a)			
a. Itemized (from Schedule A) \$	(1a)	b. Not-Itemized \$ (7b)				
b. Not-Itemized\$	(1b)	Expenditures:     Itemized (from Schedule	(8a) \$ 3531 °C (8a)			
2. Transfers In:		Not-Itemized	· · · · · · · · · · · · · · · · · · ·			
a. Itemized (from Schedule A) \$	` '	TOTAL EXPENDITURES	s (6-8) \$ 457600			
b. Not-Itemized\$		SECTION C - DEBTS AND	OBLIGATIONS			
3. Loans Received:		(Include previously reported unpa				
a. Itemized (from Schedule A) \$	(3a)	9. a. Itemized (from Schedule	C) \$ (9a)			
b. Not-Itemized\$	(3b)	b. Not-Itemized	\$ (9b)			
		TOTAL DEBTS & OBLIGAT	TIONS \$			
4. Other Receipts:						
a. Itemized (from Schedule A) \$	(4a)	SECTION D - CASH BALA	NCE			
b. Not-Itemized\$	(4b)	Funds available at the beginning				
TOTAL RECEIPTS (1-4) \$		of the reporting period:	\$ 6640.— (A)			
*****		Total Receipts (Section A)  Subtotal	\$ - <del>0</del> (B)			
***************************************		Total Expenditures (Section B)	\$ 664019 (C) \$ 4576°0 (D)			
5. In-Kind Contributions:		Funds available at the close of	4 4376 (8)			
a. Itemized (from Schedule I) \$	(5a)	the reporting period:	\$ 206419 (E)			
b. Not-Itemized \$	(5b)		****			
TOTAL IN-KIND \$		INVESTMENT TOTAL	\$(F)			
I DECLARE THAT THIS REPORT OF CAMPAIGN CO	NTRIBUTIONS OR THIS SEMI-ANN	L CATION UAL REPORT OF CAMPAIGN CONTRIBUT	IONS AND EXPENDITURES (INCLUDING			
ACCOMPANYING SCHEDULES AND STATEMENTS COMPLETE REPORT AS REQUIRED BY ARTICLE BUSINESS OFFINSE SUBJECT TO AFINE OF UP.	) HAS BEEN EXAMINED BY ME A 9 OF THE ELECTION CODE. I UN	ND TO THE BEST OF MY KNOWLEDGE A	AND BELIEF IS A TRUE, CORRECT AND			

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SIGNATURE OF TREASURER OF CANDIDATE

(THIS FORM MAY BE REPRODUCED)

NAME OF POLITICAL COMMITTEE:		REPORTING PERIOD			FOR OFF	FOR OFFICE USE ONLY		
CITIZENS FOR MAYOR GALLRAPP OILOILO 06/30/10					_			
SCHEDULE B								
INDICATE THE PART OF FORM D-2 BEING ITEMIZED:  PART 6- TRANSFERS OUT EXPENDITURES TO POLITICAL COMMITTEES - INCLUDING TICKET & RAFFLE PURCHASES  PART 8- EXPENDITURES					IDE L 14775			
SEE PAMPHLET "	A GUIDE TO	CAMPAIGN D	SCL	OSURE"				
ITEMIZED EXPENDITURES FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE OF EXPENDITURE	PURPOSE	BENE	FIĆIARY	AMOUNT OF EACH EXPENDITURE THIS REPORTING PERIOD	AGGREGATE AMOUNT THIS REPORTING PERIOD		
FREEPONT KIWANIS 3382 W.CARTHAGE DR FREEPONT IL 61032	1/10/10	Dues BANQUET	Com	n, TTEE J	320 %			
	3/6/10	FundRAJer BARAKFOST			2100	64100		
	3 31 10	Dues			3000			
Ducks Unlimited FREEDOMT Chapter (Address?)	2/1/10	golforting Sponson			34000	340 00		
PRO-GRAPHICS 1725 S. GAIENA AUC FREEDUNTIL 61032	3/4/10	MLKING Confe Sponsor Bosketbull Team			45000	45000		
Annette Cooley 1254 S. Chicogo Ave FREEDON T IL 61032	3/10/10	Sponsor Bestatbill Team			200 00	20000		
Northern ILLI Nois Development 1	Hliance	Contribution	,	}				

USE SEPARATE PAGE(S) FOR EACH NUMBERED PART

FREEDONT IL 6/03Z

TOTAL THIS PERIOD \$ \_\_\_\_\_(LAST PAGE OF THIS PART ONLY)

25000

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PAGE

Programe +CC

SIMSON

Team

3/10/10

4/27/10

27 W. Stephenson St

FREEPONT IL 61032

FREE Pon + RAPK District 1122 S. Burchard Aug

NAME OF POLITICAL COMMITTEE:		REPORTI	NG PERIOD		FOR OFF	ICE USE ONLY
· CITIZENS For MAYOR G	AULRASP_	OIJO//IO FROM	06/30/10 THRU			
SCHE	DULE	В		i		i i
INDICATE THE PART OF FORM D-2 BEING	ITEMIZED:			į	POLITICAL	COMMITTEE
PART 6- TRANSFERS OUT EXPENDITURES TO POLITICATE COMMITTEES - INCLUDING TO RAFFLE PURCHASES			OANS MADE	,	IDE L 14775	NTIFICATION NO.
SEE PAMPHLET "A	A GUIDE TO	CAMPAIGN D	ISCLOSURE'	'FOR	GUIDANCE.	
ITEMIZED EXPENDITURES FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE OF EXPENDITURE	PURPOSE	BENEFICIARY	EXPEN RE	INT OF EACH IDITURE THIS PORTING PERIOD	AGGREGATE AMOUNT THIS REPORTING PERIOD
Muscular Dystrophy Associat	1,1					

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.						
ITEMIZED EXPENDITURES FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE OF EXPENDITURE	PURPOSE	BENEFICIARY	AMOUNT OF EACH EXPENDITURE THIS REPORTING PERIOD	AGGREGATE AMOUNT THIS REPORTING PERIOD	
Muscular Dystrophy Associat 5411 E. State Stocet Rockford IL 61108	69110	DONATION	CommuTEE	25000	250 00	
Friends of NRA 11250 WAPLES Mill ROAD FAIRTAX, VA 22030	2/19/10	Banquet	-	20000	200 00	
MAYONS Hunger Luncheon 230 W Stephenson ST FREEPONT IL6/032	2/17/10	Donoth		26000	200 00	
CHARISMA 2010 6991 Redansa Drive Rockford IL 6107	3/15/10	Donether Scholorsh		50000	50000	

USE SEPARATE PAGE(S) FOR EACH NUMBERED PART

TOTAL THIS PERIOD \$ 3531

(LAST PAGE OF THIS PART ONLY)

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