•	FORM			TRIBUTIONS AND EXPENDITURES PLEASE TYPE OR PRINT IN BLACK INK)	FOR OFFICE USE ONLY		
THE BOARD		CONCON APPA	eport - Election Date:	LENGE HEE ON FRINTEIN BEACK MAY	`		
		Semi-Annual F	•	STA	TE BOARD OF ELECTIONS		
	D 2	Non-Participat	on - Election Date:				
	D-2	Final Report			1 UAN 12 AM 9:54		
MOIS		Amendment of	Report Indicated Abo	ove			
Full name and com	POLITICAL COMMITTEE						
Citizens	Committee ID: 20868						
	Citizens to Elect Lowell A Cutsforth 505 Highview Dr						
Fox Riv							
				CK IF ADDRESS CHANGE	IDENITIES ATION NO.		
					IDENTIFICATION NO.		
REPORTING P	I	CASH AVAILABL		101711210211011201121111111111111111111	LOCAL POLITICAL COMMITTEES AND STATE AND LOCAL POLITICAL		
JULY 1, 2010 DE	031201	BEGINNING OF	HE BIOD:		COMMITTEES RETURN ORIGINAL TO: STATE BOARD OF ELECTIONS		
'——/		\$ 49.81	KIOD. /	SPRINGFIELD, IL 62708-4187	AND A COPY TO EACH APPROPRIATE		
FRÓM	THRU				COUNTY CLERK.		
SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.							
COMPLETE 1	-7 FOR PI	RE-ELECTION I	REPORTS.	SECTION B -	<u>EXPENDITURES</u>		
COM	PLETE AL	L SECTIONS FO	OR	6. Transfers Out:			
SEMILAN	ANIIAI AN	ND FINAL REPO	RTS	a. Itemized (from Schedule B) \$ (6a)			
		ID I MAL KEI C	ATO.	b. Not-Itemized	\$ (6b)		
SECTION A - R	<u>ECEIPTS</u>		ž.	7. Loans made:	·		
Individual Contributions:				a. Itemized (from Schedule B) \$ (7a)			
a. Itemized (fron	n Schedule A	A) \$	(1a)	b. Not-Itemized \$(7b)			
b. Not-Itemized.	***************************************	\$	(1b)	8. Expenditures:	5) 6 (6-)		
				Itemized (from Schedule			
2. Transfers In:			•	Not-Itemized			
a. Itemized (from		·	(2a)	TOTAL EXPENDITURES	5 (6-8) \$		
b. Not-Itemized.	***************************************	\$	(2b)	SECTION C - DEBTS AND	ORI IGATIONS		
3. Loans Received:	•			(Include previously reported unpa			
a. Itemized (fror		A) \$	(3a)	9. a. Itemized (from Schedule	41//		
b. Not-Itemized.			(3b)	b. Not-Itemized			
b. Not-remized.	••••••	······· Ψ	(05)	TOTAL DEBTS & OBLIGAT	· · · · · · · · · · · · · · · · · · ·		
4. Other Receipts:							
a. Itemized (fror	n Schedule /	A) \$	(4a)	SECTION D - CASH BALA	NCE		
b. Not-Itemized		\$	(4b)	Funds available at the beginning	(0.0)		
TOTAL RE	ECEIPTS (1-	4) \$		of the reporting period:	\$ 49-81 (A)		
	•	-		Total Receipts (Section A)	\$ (B)		
	***	****		Subtotal	\$ 49.81 (C)		
				Total Expenditures (Section B)	\$ (D)		
5. In-Kind Contribu	tions:	•		Funds available at the close of			
a. Itemized (from	m Schedule i	1) \$	(5a)	the reporting period:	\$ 49,81 (E)		

VERIFICATION

INVESTMENT TOTAL

I DECLARE THAT THIS REPORT OF CAMPAIGN CONTRIBUTIONS OR THIS SEMI-ANNUAL REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE REPORT IS A BUSINESS OFFENSE SUBJECT 10 A FINE DE UP TO \$5000.

(5b)

SIGNATURE OF TREASURER OR CANDIDATE

**TOTAL IN-KIND** 

b. Not-Itemized

DATE

(THIS FORM MAY BE REPRODUCED)

(F)

FROM	THRU	

## **SCHEDULE C DEBTS AND OBLIGATIONS**

POLITICAL COMMITTEE **IDENTIFICATION NO.** ID 20868 10

SEE PAMPHLET " A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE

SEE PAMPHLET " A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.								
FULL NAME, MAILING ADDRESS, AND ZIP	DATE	ORIGINAL	CUMULATIVE PAYMENT	OUTSTANDING BALANCE				
CODE	INCURRED	AMOUNT	TO DATE ON DEBT	AT THE CLOSE OF THIS PERIOD				
LOWELL A. CUTSFORTH								
505 HIGHVIEW DRIVE	9-25.07	#		50				
FOX RIVER GROVE, IL 60021	, , ,	50	0	00				
LOWELL A. CUTSFORTH								
505 HIGHVIEW DRIVE FOX RIVER GROVE, IL 6002,	10-30-07	1000	2	°1050				
POX ALVER GROVE, IL GOOZ		, , ,		, 00				
LOWELL A. CUTSFORTH				8,				
FOX RIVER GROVE, IL boors	1-3108	300	. 0	1350				
LOWELL A. CUTSFORTH								
505 HIGHVIEW DRIVE FOX RIVER GROVE, IL 60021	3:31-09	2000	\$1095.40	2254.60				
PIX KIVER BROVE IL COUL	001-7	-						
			<					
			3/					

TOTAL THIS PERIOD \$ 2254.60

(THIS FORM MAY BE REPRODUCED)

**SEE INSTRUCTIONS ON REVERSE SIDE** 

PAGE \_2

(LAST PAGE OF THIS PART ONLY)