	FORM				IONS AND EXPENDITURES	FOR OFF	ICE USE ONLY
CALLE BOARD		CHEC			TYPE OR PRINT IN BLACK INK)	U.F.	IICAGO
			Quarterly Re (<u>check one</u>)	·	2 nd . 3 rd . 4 th		HO AGO
	D-2		Final Report		-,,	11 GCT	12 # 11: 38
LUNOIS		• _	•	: of the Report Inc	dicated Ahove	STATE BOA	RD OF ELECTIONS
Full name and co	l mplete ma	ailing addr			ulcated Above	POLITICAL	COMMITTEE
12 /		7		/	1		301111111111111111111111111111111111111
Parple	Tel	" (C)	My ll	My some	tok		_
0 /00	The Ko	XO	3/33	/		.5.	74=3
) chi	hand.		1/1011	_			- /
e-mail address:	Jefel.		(21/5#0)		CK IF ADDRESS CHANGE	IDEI	NTIFICATION No.
REPORTING P	ERIOD		/AILABLE AT	ТИС	ALL POLITICAL CO		
			NG OF THE F		STATE BOARD OF ELECTIONS		BOARD OF ELECTIONS
1-1-11 9	ا // بعب / / ا	PERIOD:		(LI OIVIIIIO	PO BOX 4187 1020 S Spring St	OR JAMES	R. THOMPSON CENTER ANDOLPH ST. STE 14-10
FROM	THRILL		s amount in SEC	TION D line (A).	SPRINGFIELD, IL 62708-4187		CAGO, IL. 60601-3232
	CO	MPLETE	ALL SECTI	ONS FOR QUA	ARTERLY AND FINAL RE	PORTS.	
	SECTIO)N A – R	ECEIPTS		SECTION B -	EXPENDIT	URES
1. Individual Con	tributions				6. Transfers Out		
a. Itemized (fro	om Schedul	e A):	\$	(1a)	 a. Itemized (from Sched) 	ule B): \$	(6a)
b. Not-Itemize	d:		\$	(1b)	b. Not-Itemized:	\$ _	(6b)
2. Transfers In					7. Loans made		
a. Itemized (fro		,	\$	(2a)	a. Itemized (from Schedu	· · · · · · · · · · · · · · · · · · ·	(7a)
b. Not-Itemized			\$	(2b)	b. Not-Itemized:	\$ <u> </u>	(7b)
3. Loans Receive		~ ^\·	c	(2 n)	8. Expenditures	de DV. 🐧	(0-)
a. Itemized (from b. Not-Itemized)		•	\$ 	(3a)	a. Itemized (from Schedu b. Not-Itemized:	· · · · · —	(8a)
4. Other Receipts			Ψ	(3b)	9. Independent Expenditur	· <u> </u>	(8b)
a. Itemized (fro		e A):	\$	(4a)	a. Itemized (from Schedu		(9a)
b. Not-Itemized		•	\$	(4b)	b. Not-Itemized:		(9b)
TOTAL RECE	PTS (1a thi	ru 4b)	\$	(12)	TOTAL EXPENDITURES (6a	<u>`</u> -	(02)
*****	*******	*****	*****	****	SECTION C - DEB		LICATIONS
					(Include previously		
					10. a. Itemized (from Schedi		2/4/3/ (100
5. In-Kind Contri	butions				b. Not-Itemized:	\$	(10b
a. Itemized (fro	om Schedule	e I):	\$	(5a)	TOTAL DEBTS & OBLIG	ATIONS: \$	2/40,38/
b. Not-Itemize			\$	(5b)	SECTION D -	CASH BAL	ANCE
TOTAL	IN-KIND (5	a+5b)	\$		Cash available at the beginning	g of the	
Name & address	s of nerson	submittir	na this report i	f other than the	the reportin	g period: \$	(A)
(ommittee's	s chairma	n or treasurer:	rodier diair die	Total Receipts from Se	ection A: \$_	(B)
					Total Cash (A)	plus (B): \$	(C)
					Total Expenditures from Se	ection B: \$	(D)
					Funds available at the clo	se of the	
					reporting period (C) m	inus (D): \$	(E)
					INVESTMENTS	STOTAL: \$	(F)
IDECLARE THE THE	01145====	2000		VERIFICA	TION	****	
BEEN EXAMINED BY M	IE AND TQ.THI	E BEST OF N	MY KNOWLEDGE A	ND BELIEF IS A TRUE	IDITURES (INCLUDING ACCOMPANYIN , CORRECT AND COMPLETE REPORT	AS REQUIRED B	Y ARTICLE 9 OF THE
\$5000.	DERSTAND T	HAT WILLFU	LLY FILING A FALS	E OR INCOMPLETE ST	FATEMENT IS SUBJECT TO A CIVIL PE	NALTY OF AT LEA	ST \$1001 AND UP TO
- flund	5//1	6/11	ngh				11/2/11
SIGNATURE OF C	OMMITTE	S'TREAS	SURER OR CA	NDIDATE ONLY			DATE
THIS FORM MAY BE				PAGE 1	of 2		REVISED 1/1/

REVISED 1/1/11

REPORTING PERIOD: FROM 01/01/2009 THRU 06/30/2009

SCHEDULE C **DEBTS AND OBLIGATIONS**

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IDENTIFICATION NO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS

FULL NAME, MAILING A	ADDRES:	S, AND ZIP CODE	DATE INCURRED	ORIGINAL AMOUNT	CUMULATIVE PAYMENT TO DATE ON DEBT	OUTSTANDING BALANCE AT THE CLOSE OF THIS PERIO
			02/28/2004	600.00	0.00	600.00
Jodi Ward 6621 S Wood					·	
Chicago	IL	60626				
Denise Washington 6445 S Sangamon St			02/18/2004	529.34	0.00	529.34
Chicago	IL	60621				
Denise Washington 6445 S Sangamon St			02/23/2004	173 28	0.00	173.28
Chicago	IL	60621				
Denise Washington 6445 S Sangamon St			03/01/2004	600.00	0.00	600.00
Chicago	IL	60621				
Denise Washington 6445 S Sangamon St			03/01/2004	675.00	0.00	675.00
Chicago	IL	60621				

OTAL THIS DEDICED &

REPORTING PERIOD: FROM 01/01/2009 THRU 06/30/2009

SCHEDULE C **DEBTS AND OBLIGATIONS**

FOR OFFICE USE ONLY

IDENTIFICATION NO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS							
FULL NAME, MAILING A	S, AND ZIP CODE	DATE INCURRED	ORIGINAL AMOUNT	CUMULATIVE PAYMENT TO DATE ON DEBT	OUTSTANDING BALANCE AT THE CLOSE OF THIS PERIOD		
			03/11/2004	430.00	0.00	430.00	
Denise Washington 6445 S Sangamon St							
Chicago	IL	60621					
Denise Washington 6445 S Sangamon St			03/12/2004	489.00	0.00	489.00	
Chicago]L	60621					
Denise Washington 6445 S Sangamon St			03/18/2004	264.34	0.00	264.34	
Chicago	IL	60621					
Jerry Washington 6445 S Sangamon			12/12/2004	1500.00	0.00	1500.00	
Chicago	IL	60621					
Jerry Washington 6445 S Sangamon			12/31/2004	16142.85	0.00	16142.85	
Chicago	IL_	60621					

TOTAL THIS PERIOD \$ 21403.81