FORM	REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (CHECK APPROPRIATE BOXES) (PLEASE TYPE OR PRINT IN BLACK INK)	FOR OFFICE USE ONLY
D-2	☐ Quarterly Report: (check one) ☐ 1st, ☐ 2nd, ☒ 3rd, ☐ 4th ☐ Final Report ☐ Amendment of the Report Indicated Above	CHICAGO 11 OCT 17 AM 8 45 STATE BOARD OF ELECTIONS

Full name and complete mailing address of Political Committee:
Citizens for Matt Bogusz
927 E Prairie Ave
Des Plaines, IL 60016-3261

POLITICAL COMMITTEE
Committee ID: 21498
04

☐ **CHECK IF ADDRESS CHANGE**

e-mail address:

IDENTIFICATION No.

REPORTING PERIOD		CASH AVAILABLE AT THE BEGINNING OF THE REPORTING PERIOD: $ 67.88	ALL POLITICAL COMMITTEES RETURN TO:		
7/1/11	9/30/11	**Repeat this amount in SECTION D line (A).**	STATE BOARD OF ELECTIONS PO BOX 4187 1020 S Spring St SPRINGFIELD, IL 62708-4187	OR	STATE BOARD OF ELECTIONS JAMES R. THOMPSON CENTER 100 W RANDOLPH ST, STE 14-100 CHICAGO, IL 60601-3232
FROM	THRU				

COMPLETE ALL SECTIONS FOR QUARTERLY AND FINAL REPORTS.

SECTION A – RECEIPTS

1. **Individual Contributions**
   - a. Itemized (from Schedule A): $ 300 (1a)
   - b. Not-Itemized:..... $ — (1b)
2. **Transfers In**
   - a. Itemized (from Schedule A): $ — (2a)
   - b. Not-Itemized:..... $ — (2b)
3. **Loans Received**
   - a. Itemized (from Schedule A): $ — (3a)
   - b. Not-Itemized:..... $ — (3b)
4. **Other Receipts**
   - a. Itemized (from Schedule A): $ — (4a)
   - b. Not-Itemized:..... $ — (4b)

TOTAL RECEIPTS (1a thru 4b) $ 300

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5. **In-Kind Contributions**
   - a. Itemized (from Schedule I): $ — (5a)
   - b. Not-Itemized:..... $ — (5b)

TOTAL IN-KIND (5a+5b) $ —

Name & address of person submitting this report if other than the committee's chairman or treasurer:

SECTION B – EXPENDITURES

6. **Transfers Out**
   - a. Itemized (from Schedule B): $ — (6a)
   - b. Not-Itemized:..... $ — (6b)
7. **Loans made**
   - a. Itemized (from Schedule B): $ — (7a)
   - b. Not-Itemized:..... $ — (7b)
8. **Expenditures**
   - a. Itemized (from Schedule B): $ — (8a)
   - b. Not-Itemized:..... $ 192.15 (8b)
9. **Independent Expenditures**
   - a. Itemized (from Schedule B-9): $ — (9a)
   - b. Not-Itemized:..... $ — (9b)

TOTAL EXPENDITURES (6a thru 9b) $ 192.15

SECTION C - DEBTS AND OBLIGATIONS

(Include previously reported unpaid debts)

10. a. Itemized (from Schedule C): $ — (10a)
    - b. Not-Itemized:..... $ — (10b)

TOTAL DEBTS & OBLIGATIONS: $ —

SECTION D - CASH BALANCE

Cash available at the beginning of the the reporting period:	$ 67.88	(A)
Total Receipts from Section A:	$ 300.00	(B)
Total Cash (A) plus (B):	$ 367.88	(C)
Total Expenditures from Section B:	$ 192.15	(D)
Funds available at the close of the reporting period (C) minus (D):	$ 175.73	(E)
INVESTMENTS TOTAL:	$ —	(F)

VERIFICATION

I DECLARE THAT THIS QUARTERLY 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 STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST $1001 AND UP TO $5000.

10/16/11

SIGNATURE OF COMMITTEE'S TREASURER OR CANDIDATE ONLY — **DATE**

NAME OF POLITICAL COMMITTEE: Citizens for Matt Bogusz

REPORTING PERIOD 7/1/11 FROM | 9/30/11 THRU

FOR OFFICE USE ONLY

SCHEDULE A
RECEIPTS

CHECK THE PART OF FORM D-2, SECTION A, BEING ITEMIZED:

- [x] PART #1- INDIVIDUAL CONTRIBUTIONS INCLUDING TICKETS AND RAFFLE SALES
- [ ] PART #3- LOANS RECEIVED INCLUDING ENDORSER
- [ ] PART #2- TRANSFERS IN POLITICAL COMMITTEE CONTRIBUTIONS INCLUDING TICKET AND RAFFLE SALES
- [ ] PART #4- OTHER RECEIPTS

POLITICAL COMMITTEE IDENTIFICATION No. 21498 04

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.

ITEMIZED RECEIPTS FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE RECEIVED	AMOUNT OF EACH RECEIPT	AGGREGATE AMOUNT FOR THIS REPORTING PERIOD
Matt Bogusz 990 W. Villa Dr. Des Plaines, IL 60016	7/29/11	$ 100 EMPLOYER:	$ 300 OCCUPATION:
Matt Bogusz 990 W. Villa Dr. Des Plaines IL 60016	8/31/11	$ 100 EMPLOYER:	$ 300 OCCUPATION:
Matt Bogusz 990 W. Villa Dr Des Plaines IL 60016	9/26/11	$ 100 EMPLOYER:	$ 300 OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:
		$ EMPLOYER:	$ OCCUPATION:

USE A SEPARATE SCHEDULE A FOR EACH PARTS 1, 2, 3, & 4

TOTAL THIS PERIOD $ 300

☐ CHECK IF THIS IS THE LAST PAGE OF THIS PART ONLY

PAGE 2