



FORM

D-2

REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (CHECK APPROPRIATE BOXES)(PLEASE TYPE OR PRINT IN BLACK INK)

- Pre-Election Report - Election Date
Semi-Annual Report
Non-Participation - Election Date
FINAL REPORT
Amendment of Report indicated above

09 JUN 2009 8:49

Full name and complete mailing address of Political Committee

Decatur Chamber NFP
111 E. Main Street
Suite 110

Decatur IL 62523

CHECK IF ADDRESS CHANGE

FOR OFFICE USE ONLY

IDENTIFICATION NO.

Table with 4 columns: REPORTING PERIOD, CASH AVAILABLE AT THE BEGINNING OF THE REPORTING PERIOD, STATE POLITICAL COMMITTEES RETURN TO, LOCAL POLITICAL COMMITTEES AND STATE AND LOCAL POLITICAL COMMITTEES RETURN ORIGINAL TO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS

COMPLETE 1-7 FOR PRE-ELECTION REPORTS

COMPLETE ALL SECTIONS FOR SEMI-ANNUAL AND FINAL REPORTS

SECTION B - EXPENDITURES

- 6. Transfers Out:
a. Itemized (from Schedule B).. \$ 0.00 (6a)
b. Not-Itemized \$ 0.00 (6b)
7. Loans Made:
a. Itemized (from Schedule B).. \$ 0.00 (7a)
b. Not-Itemized \$ 0.00 (7b)
8. Expenditures:
a. Itemized (from Schedule B).. \$ 635.33 (8a)
b. Not-Itemized \$ 0.00 (8b)
TOTAL EXPENDITURES (6-8)\$ 635.33

SECTION A - RECEIPTS

- 1. Individual Contributions:
a. Itemized (from Schedule A) .. \$ 3000.00 (1a)
b. Not-Itemized \$ 0.00 (1b)
2. Transfers In:
a. Itemized (from Schedule A) .. \$ 0.00 (2a)
b. Not-Itemized \$ 0.00 (2b)
3. Loans Received:
a. Itemized (from Schedule A) .. \$ 0.00 (3a)
b. Not-Itemized \$ 0.00 (3b)
4. Other Receipts:
a. Itemized (from Schedule A) .. \$ 0.00 (4a)
b. Not-Itemized \$ 0.00 (4b)
TOTAL RECEIPTS (1-4) \$ 3000.00

SECTION C - DEBTS AND OBLIGATIONS

- (Include previously reported unpaid debts)
9. a. Itemized (from Schedule C) . \$ 0.00 (9a)
b. Not-Itemized \$ 0.00 (9b)
TOTAL DEBTS & OBLIGATIONS\$ 0.00

SECTION D - CASH BALANCE

- Funds available at the beginning of the reporting period \$ -2364.67 (A)
Total Receipts (Section A) \$ 3000.00 (B)
Subtotal \$ 635.33 (C)
Total Expenditures (Section B) .. \$ 635.33 (D)
Funds available at the close of the reporting period \$ 0.00 (E)
Investment Total \$ 0.00 (F)

VERIFICATION

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 TO A FINE OF UP TO \$5000.

Decatur Chamber NFP
SIGNATURE OF TREASURER OR CANDIDATE

6/26/09
DATE

(THIS FORM MAY BE REPRODUCED)

REPORTING PERIOD: FROM 07/01/2008 THRU 12/31/2008

SCHEDULE A

INDICATE THE PART OF FORM D-2 BEING ITEMIZED:

- PART 1 - INDIVIDUAL CONTRIBUTIONS
INCLUDING TICKET 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

FOR OFFICE USE ONLY
IDENTIFICATION NO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS

ITEMIZED RECEIPTS FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE RECEIVED	AMOUNT OF EACH RECEIPT	AGGREGATE AMOUNT FOR THIS REPORTING PERIOD
St. Mary's Hospital 1800 East Lake Shore Drive Decatur IL 62521	07/10/2008	2000.00	2000.00
		EMPLOYER :	OCCUPATION :
Steve Horve Builders, Inc. 330 W. Marion Avenue Forsyth IL 62535	07/07/2008	1000.00	1000.00
		EMPLOYER :	OCCUPATION :

USE SEPARATE PAGE(S) FOR EACH NUMBERED PART

TOTAL THIS PERIOD \$ 3000.00
(LAST PAGE OF THIS PART ONLY)

REPORTING PERIOD: FROM 07/01/2008 THRU 12/31/2008

SCHEDULE B

INDICATE THE PART OF FORM D-2 BEING ITEMIZED:

- PART 6 — TRANSFERS OUT
 EXPENDITURES TO POLITICAL COMMITTEES —
 INCLUDING TICKET & RAFFLE PURCHASES
- PART 7 — LOANS MADE
- PART 8 — EXPENDITURES

FOR OFFICE USE ONLY

IDENTIFICATION NO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS

ITEMIZED EXPENDITURES <small>FULL NAME, MAILING ADDRESS, AND ZIP CODE</small>	<small>DATE OF EXPENDITURE</small>	<small>BENEFICIARY</small>	<small>AMOUNT OF EACH EXPENDITURE THIS REPORTING PERIOD</small>	<small>AGGREGATE AMOUNT THIS REPORTING PERIOD</small>
Greater Decatur Chamber of Commerce 111 E. Main Street Suite 110 Decatur IL 62523 PURPOSE: staff salary	07/10/2008	Greater Decatur Chamber of Commerce	635.33	635.33

USE SEPARATE PAGE(S) FOR EACH NUMBERED PART

(THIS FORM MAY BE REPRODUCED)

TOTAL THIS PERIOD \$ 635.33
 (LAST PAGE OF THIS PART ONLY)

REPORTING PERIOD: FROM 07/01/2008 THRU 12/31/2008

SCHEDULE C

DEBTS AND OBLIGATIONS

FOR OFFICE USE ONLY
IDENTIFICATION NO.

SEE GUIDE TO CAMPAIGN DISCLOSURE FOR INSTRUCTIONS

FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE INCURRED	ORIGINAL AMOUNT	CUMULATIVE PAYMENT TO DATE ON DEBT	OUTSTANDING BALANCE AT THE CLOSE OF THIS PERIOD
Greater Decatur Chamber of Commerce 111 E. Main Street Suite 110 Decatur IL 62523	04/10/2008	2364.67	0.00 (A-P3.28) [\$2364.67 FORGIVEN]	0.00

TOTAL THIS PERIOD \$ 0.00