

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Joan McCarthy Lasonde for Congress

ADDRESS (number and street)

460 Winnetka Ave



Check if different than previously reported. (ACC)

Ste 1

Winnetka

IL

60093

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00591149

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

IL

09

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

11 /

08 /

2016

in the State of

IL

(c) 30-Day **POST**-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

/

/

/

in the State of

/

5. Covering Period

10 /

01 /

2016

through

10 /

19 /

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Lasonde, Joan, McCarthy, ,

Type or Print Name of Treasurer

Signature of Treasurer

Lasonde, Joan, McCarthy, ,

[Electronically Filed]

Date

10 /

26 /

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Joan McCarthy Lasonde for Congress

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 18893.00 | 176522.60 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 1500.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 18893.00 | 175022.60 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 38062.61 | 133265.71 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 38062.61 | 133265.71 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 41781.89 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 2750.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Joan McCarthy Lasonde for Congress

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 16150.00 | 145782.68 |
| (ii) Unitemized | 2493.00 | 20883.50 |
| (iii) TOTAL of contributions from individuals | 18643.00 | 166666.18 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 4450.00 |
| (d) The Candidate | 250.00 | 5406.42 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 18893.00 | 176522.60 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 25.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 18893.00 | 176547.60 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 21

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 38062.61 | 133265.71 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1500.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 1500.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 38062.61 | 134765.71 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 60951.50 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 18893.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 79844.50 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 38062.61 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 41781.89 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | | | |
|---|---|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 5 OF 21 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Ambrose, Gerald, A, ,

Mailing Address 844 Bryant Ave

| | | |
|------------------|-------------|-------------------|
| City Winnetka | State IL | Zip Code 60093 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-----------------------|
| Name of Employer Sidley Austin LLP | Occupation Partner |
|---------------------------------------|-----------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2016

Transaction ID : SA11AI.5137

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Berlin, Lawrence, , ,

Mailing Address 838 Michigan Ave

| | | |
|------------------|-------------|-------------------|
| City Evanston | State IL | Zip Code 60202 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------------------|-------------------------------|
| Name of Employer First Analysis | Occupation Venture Capital |
|------------------------------------|-------------------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2016

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Bitterman, Pincas, , ,

Mailing Address 9531 Avers Ave

| | | |
|------------------|-------------|-------------------|
| City Evanston | State IL | Zip Code 60203 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Information Requested | Occupation Information Requested |
|---|-------------------------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2016

Transaction ID : SA11AI.5182

Amount of Each Receipt this Period
250.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 3250.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Brown, Frances, B., ,
 Mailing Address 629 Hillcrest Dr
 City State Zip Code
 Libertyville IL 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2016
Transaction ID : SA11AI.5129
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Carter, Jeff, , ,
 Mailing Address 60 E Monroe
 City State Zip Code
 Chicago IL 60603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Investor
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 11 2016
Transaction ID : SA11AI.5186
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Dooley, Cynthia, E., ,
 Mailing Address 2515 Greenwood Ave
 City State Zip Code
 Wilmette IL 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 10 2016
Transaction ID : SA11AI.5141
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Feit, Peter, , ,

Mailing Address 1306 Oxford Lane

City: Glenview State: IL Zip Code: 60025

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Employed Occupation: Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1500.00

Date of Receipt: 10 / 19 / 2016

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Geller, Laurence, S, ,

Mailing Address 19 S Lasalle St Ste 1100

City: Chicago State: IL Zip Code: 60603

FEC ID number of contributing federal political committee: **C**

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 11 / 2016

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period: 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gray, James, A, ,

Mailing Address 440 S Lasalle Ste 650

City: Chicago State: IL Zip Code: 60605

FEC ID number of contributing federal political committee: **C**

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 11 / 2016

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period: 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Gross, Dietrich, M, ,
Mailing Address 769 Michigan

| | | |
|------------------|-------------|-------------------|
| City Wilmette | State IL | Zip Code 60091 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Information Requested | Occupation Information Requested |
|---|-------------------------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2016

Transaction ID : SA11AI.5191

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gross, Erika, , ,
Mailing Address 769 Michigan

| | | |
|------------------|-------------|-------------------|
| City Wilmette | State IL | Zip Code 60091 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------|-----------------------|
| Name of Employer None | Occupation Retired |
|--------------------------|-----------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Harris, Coco, , ,
Mailing Address 910 9th St

| | | |
|------------------|-------------|-------------------|
| City Wilmette | State IL | Zip Code 60091 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---------------------------------|
| Name of Employer The Hudson Company | Occupation Real Estate Sales |
|--|---------------------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2016

Transaction ID : SA11AI.5171

Amount of Each Receipt this Period
200.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 5200.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | | | |
|---|---|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 9 OF 21 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Kolber, Vincent, A., ,

Mailing Address 3 First National Plaza
70 W. Madison St 2340

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60602 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer Residco | Occupation Manager |
|-----------------------------|-----------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : SA11AI.5159

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lasonde, Virginia, M., ,

Mailing Address 6 Rochford Dr

| | | |
|-------------------|-------------|-------------------|
| City Wilbraham | State MA | Zip Code 01095 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------|-----------------------|
| Name of Employer None | Occupation Retired |
|--------------------------|-----------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2016

Transaction ID : SA11AI.5181

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Santowski, Laura, , ,

Mailing Address 1514 Seville Ct
A1

| | | |
|------------------|-------------|-------------------|
| City Wheeling | State IL | Zip Code 60090 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|-------------------------------------|
| Name of Employer Information Requested | Occupation Information Requested |
|---|-------------------------------------|

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2016

Transaction ID : SA11AI.5125

Amount of Each Receipt this Period
50.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 400.00 |
| TOTAL This Period (last page this line number only)..... ▶ | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Tillman, John, , ,

Mailing Address 52 Briar Rd

City Golf State IL Zip Code 60029

FEC ID number of contributing federal political committee. **C**

Name of Employer GAA Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11AI.5249

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Tillman, Julie, , ,

Mailing Address 52 Briar Rd

City Golf State IL Zip Code 60029

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11AI.5250

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5400.00

16150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

A. Full Name (Last, First, Middle Initial)
Lasonde, Joan, McCarthy, ,

Mailing Address 622 Central Ave

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C** H6IL09145

Name of Employer Congressional Candidate Occupation Self Employed

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5406.42

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2016

Transaction ID : SA11D.5236

Amount of Each Receipt this Period
 250.00

Memo Item
In-kind - Event Tickets

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 250.00 |
| TOTAL This Period (last page this line number only)..... ▶ | 250.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016 |
| Mailing Address 10156 Perkins Rd Ste 217F | | FEC Identification Number C |
| City Baton Rouge | State LA | Zip Code 70810 |
| Purpose of Disbursement CC Transaction Fees | | Amount of Each Disbursement this Period 12.30 |
| Candidate Name | | Transaction ID : SB17.5108 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016 |
| Mailing Address 10156 Perkins Rd Ste 217F | | FEC Identification Number C |
| City Baton Rouge | State LA | Zip Code 70810 |
| Purpose of Disbursement CC Transaction Fees | | Amount of Each Disbursement this Period 2.25 |
| Candidate Name | | Transaction ID : SB17.5115 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016 |
| Mailing Address 10156 Perkins Rd Ste 217F | | FEC Identification Number C |
| City Baton Rouge | State LA | Zip Code 70810 |
| Purpose of Disbursement CC Transaction Fees | | Amount of Each Disbursement this Period 63.84 |
| Candidate Name | | Transaction ID : SB17.5190 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 78.39 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 21 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016 | | |
| Mailing Address 10156 Perkins Rd Ste 217F | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70810 | Amount of Each Disbursement this Period 8.40 | | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | Transaction ID : SB17.5167 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016 | | |
| Mailing Address 10156 Perkins Rd Ste 217F | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70810 | Amount of Each Disbursement this Period 1.27 | | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | Transaction ID : SB17.5168 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2016 | | |
| Mailing Address 10156 Perkins Rd Ste 217F | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70810 | Amount of Each Disbursement this Period 8.10 | | |
| Purpose of Disbursement CC Transaction Fees | | Category/ Type | Transaction ID : SB17.5172 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 17.77 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 14 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2016 |
| Mailing Address 10156 Perkins Rd Ste 217F | | FEC Identification Number C |
| City Baton Rouge | State LA | Zip Code 70810 |
| Purpose of Disbursement CC Transaction Fees | | Amount of Each Disbursement this Period 1.27 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5173 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Anedot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016 |
| Mailing Address 10156 Perkins Rd Ste 217F | | FEC Identification Number C |
| City Baton Rouge | State LA | Zip Code 70810 |
| Purpose of Disbursement CC Transaction Fees | | Amount of Each Disbursement this Period 243.89 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5252 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) C. Brown, TJ, , , | | Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016 |
| Mailing Address 1737 Happ Rd | | FEC Identification Number C |
| City Northbrook | State IL | Zip Code 60062 |
| Purpose of Disbursement Financial Consulting | | Amount of Each Disbursement this Period 5000.00 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5130 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 5245.16 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 15 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Cor Strategies, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016 |
| Mailing Address 309 N Williams Dr | | FEC Identification Number C |
| City Palatine | State IL | Zip Code 60074 |
| Purpose of Disbursement Digital Marketing | | Amount of Each Disbursement this Period 13982.47 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5153 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Election Graphics | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016 |
| Mailing Address PO Box 1140 | | FEC Identification Number C |
| City Evanston | State IL | Zip Code 60204 |
| Purpose of Disbursement Web Hosting | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5078 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Lasonde, Joan, McCarthy, , | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016 |
| Mailing Address 622 Central Ave | | FEC Identification Number C H6IL09145 |
| City Wilmette | State IL | Zip Code 60091 |
| Purpose of Disbursement In-kind - Event Tickets | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name | Category/ Type | Transaction ID : SB17.5237 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item |
| State: IL District: 09 | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 14482.47 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 16 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Lloyds Chicago | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016 | |
| Mailing Address 1 S Wachter Dr | | | FEC Identification Number C | |
| City Chicago | State IL | Zip Code 60606 | Amount of Each Disbursement this Period 770.99 | |
| Purpose of Disbursement Event Catering | | Category/ Type | Transaction ID : SB17.5196 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Maraldi Designs | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016 | |
| Mailing Address 6242 W Byron St | | | FEC Identification Number C | |
| City Chicago | State IL | Zip Code 60634 | Amount of Each Disbursement this Period 75.00 | |
| Purpose of Disbursement Graphic Design Consulting | | Category/ Type | Transaction ID : SB17.5079 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. Meyers O'Donnell, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016 | |
| Mailing Address 1500 S. Western Ave | | | FEC Identification Number C | |
| City Chicago | State IL | Zip Code 60608 | Amount of Each Disbursement this Period 1575.00 | |
| Purpose of Disbursement Graphic Consulting | | Category/ Type | Transaction ID : SB17.5132 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2420.99 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 17 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. New Trier Republican Organization | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2016 |
| Mailing Address 460 Winnetka Ave Ste 1 | | FEC Identification Number C |
| City Winnetka | State IL | Zip Code 60093 |
| Purpose of Disbursement Rent | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 1500.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5255 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Petty Cash | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016 |
| Mailing Address 460 Winnetka Ave Ste 1 | | FEC Identification Number C |
| City Winnetka | State IL | Zip Code 60093 |
| Purpose of Disbursement Petty Cash | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 500.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5197 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Republicans of Wheeling Township | | Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016 |
| Mailing Address PO Box 1506 | | FEC Identification Number C |
| City Arlington Heights | State IL | Zip Code 60006 |
| Purpose of Disbursement Printing | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 500.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5233 |
| State: District: | <input type="checkbox"/> Memo Item | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 18 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Sharper Dot Printing | | Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2016 |
| Mailing Address 8120 River Dr | | FEC Identification Number C |
| City Morton Grove | State IL | Zip Code 60053 |
| Purpose of Disbursement Printing | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 870.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5131 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Silver, Ashley, Kain, , . | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016 |
| Mailing Address 226 Sheridan Rd | | FEC Identification Number C |
| City Glencoe | State IL | Zip Code 60022 |
| Purpose of Disbursement Field Consulting | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 2500.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5194 |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Taboun Grill | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016 |
| Mailing Address 8808 Gross Point | | FEC Identification Number C |
| City Skokie | State IL | Zip Code 60077 |
| Purpose of Disbursement Event Catering | Category/Type | |
| Candidate Name | Amount of Each Disbursement this Period 1700.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5106 |
| State: District: | <input type="checkbox"/> Memo Item | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 5070.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 21 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Wierzbicki, Eve, Landsman, , | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2016 | | |
| Mailing Address 1 Cedar Trail | | | FEC Identification Number C | | |
| City Ogden Dunes | State IN | Zip Code 46368 | | | |
| Purpose of Disbursement Marketing Consulting | | Category/ Type | Transaction ID : SB17.5143 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Wierzbicki, Eve, Landsman, , | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016 | | |
| Mailing Address 1 Cedar Trail | | | FEC Identification Number C | | |
| City Ogden Dunes | State IN | Zip Code 46368 | | | |
| Purpose of Disbursement Marketing Consulting | | Category/ Type | Transaction ID : SB17.5162 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Winning Systems, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2016 | | |
| Mailing Address 105 S York St #500 | | | FEC Identification Number C | | |
| City Elmhurst | State IL | Zip Code 60126 | | | |
| Purpose of Disbursement Fundraising Consulting | | Category/ Type | Transaction ID : SB17.5098 | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 5300.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 20 OF 21 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Winning Systems, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016 | |
| Mailing Address 105 S York St #500 | | | FEC Identification Number C | |
| City Elmhurst | State IL | Zip Code 60126 | Amount of Each Disbursement this Period 2500.00 | |
| Purpose of Disbursement Fundraising Consulting | | Category/ Type | Transaction ID : SB17.5154 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Zoo Printers | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016 | |
| Mailing Address 4015 Produce Rd | | | FEC Identification Number C | |
| City Louisville | State KY | Zip Code 40218 | Amount of Each Disbursement this Period 447.83 | |
| Purpose of Disbursement Palm Cards | | Category/ Type | Transaction ID : SB17.5160 | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | |
| Mailing Address | | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | | Category/ Type | Memo Item | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2947.83 |
| TOTAL This Period (last page this line number only).....▶ | 38062.61 |

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Joan McCarthy Lasonde for Congress

| | | | |
|---|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lasonde, Joan, McCarthy, , | | | Nature of Debt (Purpose): Logo Design |
| Mailing Address 622 Central Ave | | | |
| City Wilmette | State IL | Zip Code 60091 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.4190 | |
| 250.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 250.00 | |

| | | | |
|---|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lasonde, Joan, McCarthy, , | | | Nature of Debt (Purpose): Legal Services paid to Jackson Law Offices |
| Mailing Address 622 Central Ave | | | |
| City Wilmette | State IL | Zip Code 60091 | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.4189 | |
| 2500.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | 0.00 | 2500.00 | |

| | | | |
|--|-------|----------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Outstanding Balance at Close of This Period | |
| | | | |
| Amount Incurred This Period | Payment This Period | | |
| | | | |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional) | ▶ | 2750.00 |
| 2) TOTALS This Period (last page this line number only) | ▶ | 2750.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | 2750.00 |