PAGE 1 / 24

FFC I	REPORT OF ND DISBUR For An Authorized	SEMENTS	0	ffice Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typ over the lines.	be 12FE4M5	
Coolidge For Congress				
ADDRESS (number and street)	345 Old Sutton Road			
Check if different				
than previously reported. (ACC)	Barrington			0010
2. FEC IDENTIFICATION NU		ry ▲	STATE	ZIP CODE
C C00505610	3. IS T	ORT NEW (N) OF	AMENDEI (A)	D STATE ▼ DISTRICT
<ul> <li><b>4. TYPE OF REPORT</b> (Choose)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Reports</li> <li>July 15 Quarterly Reports</li> </ul>	(b) 12-D	ay PRE-Election Report for Primary (12P) Convention (12C)	the: General (120 Special (128	
October 15 Quarter	ly Report (Q3) Elec	tion on	D / Y Y Y Y	in the State of
January 31 Year-En	d Report (YE) (c) 30-D	ay <b>POST</b> -Election Report fo	or the: Runoff (30R)	Special (30S)
Termination Report		tion on	D / Y Y Y Y	in the State of
5. Covering Period	M / D D / Y Y Y Y 01 2018	Y through	M M / D D / 03 31	Y Y Y Y 2018
I certify that I have examined thi Type or Print Name of Treasurer	Coolidge, Leslie, , ,	f my knowledge and belief	it is true, correct and c	complete.
Cool Signature of Treasurer	idge, Leslie, , ,	[Electronically Filed]	Date 04	/ D D / Y Y Y Y 15 / 2018
NOTE: Submission of false, errone	ous, or incomplete informatio	on may subject the person si	gning this Report to the	penalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

IIIId	iye# /	201804159108158050		
		FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 24
		or Type Committee Name lidge For Congress		
F	leport	t Covering the Period: From:	M / D D / Y Y Y Y 01 / 2018 To:	M 03 / D D / Y Y Y Y 31 / 2018
			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))	0.00	0.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	120.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	15.41
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	104.59
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on ledule C and/or Schedule D)	143008.02	

## For further information contact:

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

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

Γ	FEC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 24
W	rite or Type Committee Name		
	Coolidge For Congress		
_			
R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 / 2018 To	: 03 / D D / Y Y Y Y 31 2018
	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	0.00	0.00
	(i) Itemized (use Schedule A)	, , , , , , , , , , , , , , , , , , , ,	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(d) The Candidate		
	(other than loans)	0.00	0.00
	(add Lines 11(a)(iii), (b), (c), and (d))	7 7 7 0.00	
12.	TRANSFERS FROM OTHER	0.00	0.00
	AUTHORIZED COMMITTEES	7 7 7 *	
13.			
	(a) Made or Guaranteed by the Candidate	0.00	0.00
		0.00	0.00
	(b) All Other Loans (c) TOTAL LOANS	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	(add Lines 13(a) and (b))	0.00	0.00
14.	OFFSETS TO OPERATING		
	EXPENDITURES	0.00	15.41
	(Refunds, Rebates, etc.)	0.00	7 7 7
15.	OTHER RECEIPTS	0.00	
	(Dividends, Interest, etc.)	0.00	0.00
16.	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15)		
	(Carry Total to Line 24, page 4)	0.00	15.41

Image# 201804159108156031

FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 120.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 by the Candidate..... 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 Than Political Committees ..... 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 (such as PACs) ..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS .....

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)

			0.00		1
- 7 -	1	7			
			0.00		1
7		7		-	1

**III. CASH SUMMARY** 

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	_	,		7	_	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)				7	_	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		,		7	_	0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)				7	_	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		.,		7	_	0.00

## **DETAILED SUMMARY PAGE**

of Disbursements

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

120.00

•				
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a
ME OF COMMITTEE (In Full) coolidge For Congress			Transac	tion ID : SC/10.4139
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010	9	<b>X</b> Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio
13540.04		7	1500.00	12040.04
TERMS Date Incurred	Ľ	Date Due	Interest Rate (If none, enter	
M10M / D18D / Y Ž01Ť Y	M M / D D	<sup>/</sup> <sup>Y</sup> 12	ý31/Ĭ2 <sup>×</sup> 0.	00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line only				12040.04

				r	
CHEDULE C (FEC F DANS	orm 3)			Use separate schedule for each category of t Detailed Summary Pag	the (check only one) × 13a
ME OF COMMITTEE (In Full)				Transad	ction ID : SC/10.4138
LOAN SOURCE Full Name Coolidge, Leslie, , ,	(Last, First, Mic	Idle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	9	X Personal Funds of the Candidate
Original Amount of Loan	100.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric 100.00
TERMS         Date Incurred           M11 <sup>M</sup> /         D08 <sup>D</sup> /         Y	Ž01 ř <sup>v</sup>	M M / D D	Date Due	Interest Rate (If none, ente) //31/12 Y 0.	
List All Endorsers or Guara 1. Full Name (Last, First, M		o Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed	y
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 x 1
UBTOTALS This Period This OTALS This Period (last page					100.00

HEDULE C (FEC	Form 3)			Use separate schedule for each category of t Detailed Summary Pag	the (check only one) × 13a
ME OF COMMITTEE (In Fu oolidge For Congres				Transad	ction ID : SC/10.4137
LOAN SOURCE Full Nam Coolidge, Leslie, , ,	ne (Last, First, Mid	dle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	)	X Personal Funds of the Candidate
Original Amount of Loan	500.00	Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Peric
TERMS         Date Incurre           M12 <sup>M</sup> /         D15 <sup>D</sup> /         Y		M M / D D	Date Due	Interest Rate (If none, enter //31/12 Y 0.	
List All Endorsers or Gua 1. Full Name (Last, First,		b Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, N	Middle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed	y
3. Full Name (Last, First, N	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, N	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 1 9 1 1 A
JBTOTALS This Period This	s Page (optional)			······	500.00

HEDULE C (FEC	Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Fu oolidge For Congres				Transaction ID : SC/10.4142
LOAN SOURCE Full Nan Coolidge, Leslie, , ,	ne (Last, First, Mic	Idle Initial)		Memo Item Election: 2012           X         Primary           General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	e  Personal Funds of the Candid
Original Amount of Loan	5154.15	Cumulative Pa	yment To D	Date Balance Outstanding at Close of This Pe 0.00 5154.15
TERMS   Date Incurr     M01 <sup>M</sup> /   D02 <sup>D</sup> /	ed <sup>Y</sup> Ž01Ž <sup>Y</sup>	C	Date Due	Interest Rate Secured: (If none, enter 0) 1/31/12 Y 0.00 % (apr) Yes X
List All Endorsers or Gua 1. Full Name (Last, First,		b Loan Source		Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed Outstanding:
2. Full Name (Last, First,	Middle Initial)			Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed Outstanding:
3. Full Name (Last, First,	Middle Initial)			Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed Outstanding:
4. Full Name (Last, First,	Middle Initial)			Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed Outstanding:
JBTOTALS This Period Thi	s Page (optional)		I	5154.15

J	-				
HEDULE C (FE	C Form 3)			Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a
ME OF COMMITTEE (In oolidge For Congr	,			Transa	action ID : SC/10.4141
LOAN SOURCE Full N Coolidge, Leslie,	•	ddle Initial)		Memo Iten	× Primary
Mailing Address 345 Old Sutton Road					General Other (specify) ▼
City Barrington Hills		State	ZIP Code 60010	9	Personal Funds of the Candidate
Original Amount of Loa	an	Cumulative P	ayment To D	Date Ba	lance Outstanding at Close of This Perio
,	11000.00			0.00	11000.00
TERMS Date Inc	urred		Date Due	Interest Ra (If none, ent	
<sup>M</sup> 02 <sup>M</sup> / <sup>D</sup> 23 <sup>D</sup> /	<sup>ү</sup> Ž01Ž <sup>ү</sup>	M M / D	D / Y 12		
List All Endorsers or ( 1. Full Name (Last, Fir		o Loan Source		Name of Employer	
• •					
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7 7
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1
3. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1
JBTOTALS This Period					7 7 7 11000.00

Use separate schedule(s) for each category of the Detailed Summary Page       FOR LINE NUMBER: (check only one)       13a         Transaction ID : SC/10.4140       Image: Science in the Scien
Memo Item       Election: 2012         Y       Primary         General       Other (specify)         Other (specify)       ▼         Code       ✓         10       Y         Personal Funds of the Candidat         To Date       Balance Outstanding at Close of This Perior         0.00       15000.00         ue       Interest Rate (If none, enter 0)         Y       12/31/12
Code 10 To Date Balance Outstanding at Close of This Perior 0.00 Ue Interest Rate (If none, enter 0) 12/31/12 ▼ 0.00 V 12/31/12 ▼ Northo Renn Primary General Other (specify) ▼ Personal Funds of the Candidat Secured:
Code 10 To Date Balance Outstanding at Close of This Period 0.00 Ue Interest Rate (If none, enter 0) 12/31/12 1 0.00
To Date Balance Outstanding at Close of This Period 0.00 15000.00 Ule Interest Rate (If none, enter 0) 12/31/12 0.00
0.00 15000.00 Ue Interest Rate (If none, enter 0) ¥ 12/31/12 ¥ 0.00
(If none, enter 0)
Name of Employer
Occupation
Amount Guaranteed Outstanding:
Name of Employer
Occupation
Amount Guaranteed Outstanding:
Name of Employer
Occupation
Amount Guaranteed Outstanding:
Name of Employer
Occupation
Amount Guaranteed Outstanding:
······ 15000.00
-

•				
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a
ME OF COMMITTEE (In Full) coolidge For Congress			Transac	tion ID : SC/10.4143
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	ddle Initial)		Memo Item	Election: 2012 <b>X</b> Primary General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills				X Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Peric
15900.95	5		0.00	15900.95
TERMS Date Incurred	Γ	Date Due	Interest Rate (If none, enter	0)
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 07 <sup>D</sup> / <sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	/ ¥ 12/	31/Ĭ2 <sup>¥</sup> 0.0	
List All Endorsers or Guarantors (if any) t	to Loan Source			
1. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Dccupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	7
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Dccupation	
City State	e ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Dccupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	g
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address		(	Dccupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	9 1 9 1 7 1
UBTOTALS This Period This Page (optional).				15900.95

Use separate schedule(s) for each category of the Detailed Summary Page Transaction ID : SC/10.4 Memo Item Election: 201 Primary General Other (spe Other (spe)	13b 1146 2 cify) ▼ Funds of the Candidate at Close of This Period 653.85 Secured:
Memo Item Election: 201 Primary General Other (spe Control of the second	2 ccify) ▼ Funds of the Candidate at Close of This Perior 653.85 Secured:
A memoritor item     Primary     General     Other (spe     Other (spe     Density of the second secon	Funds of the Candidate at Close of This Perior 653.85 Secured:
Contraction  Cont	Funds of the Candidate at Close of This Perio 653.85 Secured:
te Balance Outstanding 0.00 Interest Rate (If none, enter 0) 31/12 Y 0.00 % (apr) ame of Employer ccupation mount	at Close of This Perio 653.85 Secured:
0.00 Interest Rate (If none, enter 0) 31/12 Y 0.00 % (apr) ame of Employer ccupation mount	653.85 7 Secured:
Interest Rate (If none, enter 0) 31/12 V 0.00 % (apr) ame of Employer recupation	Secured:
(If none, enter 0) 31/12 Y 0.00 % (apr) ame of Employer Inccupation mount	
ame of Employer	Yes X No
ccupation	
ccupation	
mount	
Amount Guaranteed Outstanding:	
ame of Employer	
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mount uaranteed utstanding:	
ame of Employer	
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mount uaranteed utstanding:	
ame of Employer	
ccupation	
mount uaranteed utstanding:	1 1 1 1
	653.85
	utstanding:

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Full)				tion ID : SC/10.4144
LOAN SOURCE Full Name (Last, First, Mid Coolidge, Leslie, , ,	Idle Initial)		Memo Item	Election: 2012
Mailing Address 345 Old Sutton Road				General Other (specify) ▼
City Barrington Hills	State IL	ZIP Code 60010	)	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate Balar	nce Outstanding at Close of This Peric
6000.00		,	0.00	6000.00
TERMS Date Incurred		Date Due	Interest Rate (If none, enter	0)
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 09 <sup>D</sup> / <sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	Ý 12	/31/12 <sup>Y</sup> 0.0	
List All Endorsers or Guarantors (if any) to	o Loan Source			
1. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	y
4. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(	Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	9 9
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line only				6000.00 7 7 7

, Middle Initial)		Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a		
, Middle Initial)		Transac	tion ID : SC/10.4145		
, Middle Initial)					
	LOAN SOURCE Full Name (Last, First, Middle Initial) Coolidge, Leslie, , , Mailing Address 345 Old Sutton Road				
			Other (specify) <b>v</b>		
State IL	ZIP Cod 60010	e	X Personal Funds of the Candidate		
Cumulative	Payment To [	Date Bala	nce Outstanding at Close of This Perio		
	, ,	0.00	18861.70		
	Date Due	Interest Rate (If none, enter			
M M / D	D / Y 12	2/31/12 <sup>×</sup> 0.	00 % (apr) Yes 🗴 No		
ny) to Loan Sou	rce				
		Name of Employer			
		Occupation			
State ZIP Code		Amount Guaranteed Outstanding:			
		Name of Employer			
		Occupation			
tate ZIP Code		Amount Guaranteed Outstanding:	y y		
		Name of Employer			
		Occupation			
State ZIP Code		Amount Guaranteed Outstanding:	y		
4. Full Name (Last, First, Middle Initial)					
		Occupation			
e ZIP Code		Amount Guaranteed Outstanding:	y y		
		L	18861.70		
	te ZIP Code	IL       60010         Cumulative Payment To I         Date Due         M       /       D         M       /       D       /         ny) to Loan Source         ny) to Loan Source         te       ZIP Code         te       ZIP Code         te       ZIP Code         te       ZIP Code	IL       60010         Cumulative Payment To Date       Bala         0.00       0.00         Date Due       Interest Rate (If none, enter         M       /       D       /       Y 12/31/12 Y       0.00         ny) to Loan Source       Name of Employer         occupation       Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:         te       ZIP Code       Occupation         Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:         te       ZIP Code       Name of Employer         te       ZIP Code       Name of Employer         Amount Guaranteed Outstanding:       Name of Employer         te       ZIP Code       Name of Employer         te       ZIP Code       Amount Guaranteed Outstanding:         te       ZIP Code       Name of Employer		

	0.10				PAGE 15 OF 24	
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ame of committee Coolidge For Con	. ,			Transad	ction ID : SC/10.4147	
LOAN SOURCE Ful Coolidge, Leslie	II Name (Last, First, Mic 2, , ,	ddle Initial)		Memo Item	Election: 2012 Primary <b>x</b> General	
Mailing Address 345 Old Sutton Road					Other (specify) ▼	
City Barrington Hills		State IL	ZIP Code 60010	e	X Personal Funds of the Candidate	
Original Amount of	Loan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio	
	2661.28			0.00	2661.28	
TERMS Date	Incurred	[	Date Due	Interest Rate (If none, enter		
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 20 <sup>D</sup>	/ Y Ž01Ž Y	M M / D D	y 12	)/31/12 <sup>Y</sup> 0.	.00 % (apr) Yes X No	
List All Endorsers o	or Guarantors (if any) t	o Loan Source				
1. Full Name (Last,	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	e ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
	od This Page (optional). Ist page in this line only				2661.28	
Carry outstanding bala	nce only to LINE 3, Sci	nedule D, for thi	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.	

CHEDULE C (FEC Form 3)			Use separate schedule	
DANS			for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Full) Coolidge For Congress			Transac	tion ID : SC/10.4148
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010	e	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Peric 1000.00
TERMS Date Incurred	, C	Date Due	Interest Rate (If none, enter	
M04 <sup>M</sup> / D03 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ Y 12	ý31/12 <sup>×</sup>	% (apr) Yes ✗ №
List All Endorsers or Guarantors (if any) t	o Loan Source		Name of Employer	
1. Full Name (Last, First, Middle Initial)	1. Full Name (Last, First, Middle Initial)			
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period This Page (optional).			······	1000.00
OTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch				

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) Coolidge For Congress		Transaction ID : SC/10.4149
LOAN SOURCE Full Name (Last, First, Coolidge, Leslie, , ,	Middle Initial)	Memo Item Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road		Other (specify)
City Barrington Hills	State IL	ZIP Code 60010
Original Amount of Loan 1652.64	Cumulative Pa	Image: memory of the second
TERMS     Date Incurred       M04 <sup>M</sup> /     D26 <sup>D</sup> /     Y     Ž01Ž     Y		ate Due Interest Rate Secured: (If none, enter 0) 0.00 % (apr) Yes X N
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation Amount
City State	e ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	l	Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	al)	1652.64
TOTALS This Period (last page in this line		s line. If no Schedule D, carry forward to appropriate line of Summary.

CHEDULE C (FE	C Form 3)			Use separate schedule	
DANS	-			for each category of the Detailed Summary Page	he (check only one) X 13a
AME OF COMMITTEE (In Coolidge For Cong	,			Transac	tion ID : SC/10.4136
LOAN SOURCE Full I Coolidge, Leslie,	•	Idle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	e	X Personal Funds of the Candidate
Original Amount of Lo	an 71.61	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio 71.61
TERMS Date Inc	curred Y Ž01Ž Y	C M M / D D	Date Due	Interest Rate (If none, enter )/31/12 Y 0.0	00 <b>0 1 1 1 1 1 1</b>
List All Endorsers or 1. Full Name (Last, Fi		o Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7
3. Full Name (Last, Fire	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y y
4. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9
UBTOTALS This Period					71.61
Carry outstanding balanc	e only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

Middle Initial)		Use separate schedule for each category of th Detailed Summary Pag Transac	<sup>ne</sup> (check only one) × 13a
State			Election: 2012
State		Memo Item	
			<b>x</b> General
			Other (specify)
IL	ZIP Code 60010	e	X Personal Funds of the Candidat
Cumulative Pa	ayment To D	Date Bala	nce Outstanding at Close of This Peric
		0.00	439.77
	Date Due	Interest Rate (If none, enter	
M M / D	D / Y 12	ý31/12 <sup>v</sup>	00 % (apr) Yes 🗶 No
y) to Loan Source	e		
		Name of Employer	
		Occupation	
State ZIP Code		Guaranteed	y y
		Name of Employer	
		Occupation	
e ZIP Code		Guaranteed	y y
		Name of Employer	
		Occupation	
State ZIP Code		Guaranteed	y y
4. Full Name (Last, First, Middle Initial)			
		Occupation	
e ZIP Code	(	Guaranteed	y y
		H	439.77
	Cumulative P Cumulative P Cumul	Cumulative Payment To D Date Due Date Due M M / D D / Y 12 ny) to Loan Source	Cumulative Payment To Date       Bala         0.00       Date Due       Interest Rate (If none, enter (If none, enter         M       /       D       /       12/31/12       0.         ny) to Loan Source       Name of Employer       Occupation       Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:       If P Code         e       ZIP Code       Occupation       Amount Guaranteed Outstanding:       Occupation         e       ZIP Code       Occupation       Amount Guaranteed Outstanding:       Name of Employer         e       ZIP Code       Name of Employer       Occupation         Amount       Guaranteed Outstanding:       Name of Employer         occupation       Amount Guaranteed Outstanding:       Amount Guaranteed Outstanding:         Mame of Employer       Occupation       Amount Guaranteed Outstanding:         Mame of Employer       Occupation       Amount Guaranteed         Mame of Employer       Occupation       Amount         Mame of Employer       Occupation       Amount

CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Coolidge For Congre	,			l Transac	ction ID : SC/10.4150	
LOAN SOURCE Full Na Coolidge, Leslie, ,	•	Idle Initial)		🗌 Memo Item	Election: 2012 Primary General	
Mailing Address 345 Old Sutton Road					Other (specify) ▼	
City Barrington Hills		State IL	ZIP Code 60010	e	Y Personal Funds of the Candidate	
Original Amount of Loan	n 12000.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio	
TERMS         Date Incu           M10 <sup>M</sup> /         P19 <sup>D</sup> /	YŽ01ŽY	M M / D D	Date Due	./01/12		
List All Endorsers or G 1. Full Name (Last, Firs		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:	g. 1 1 g. 1 1 m 1	
2. Full Name (Last, First	, Middle Initial)	1		Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7 7	
3. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First	, Middle Initial)	·		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 1 1	
SUBTOTALS This Period T					12000.00	
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forv	ward to appropriate line of Sumn	

CHEDULE C (FEC Form 3)			Use separate schedule	PAGE 21 OF 24
DANS			for each category of the Detailed Summary Page	he (check only one) X 13a
AME OF COMMITTEE (In Full) Coolidge For Congress			Transac	tion ID : SC/10.4135
LOAN SOURCE Full Name (Last, First, Mi Coolidge, Leslie, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010	e	Personal Funds of the Candidate
Original Amount of Loan 32161.19	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Peric 32161.19
TERMS Date Incurred	Ē	Date Due	Interest Rate (If none, enter	
M10 <sup>M</sup> / D26 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ ¥ 12	ý31/12 <sup>v</sup>	00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	State ZIP Code		Amount Guaranteed Outstanding:	g
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This Page (optional)			······	32161.19
TOTALS This Period (last page in this line onl				yard to appropriate line of Summer

CHEDULE C (F DANS	EC Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE	. ,				tion ID : SC/10.4134	
5	Il Name (Last, First, Mic	ddle Initial)		☐ Memo Item	Election: 2012 Primary X General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City Barrington Hills		State IL	ZIP Code 60010	9	Personal Funds of the Candidate	
Original Amount of	Loan 6000.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric 6000.00	
TERMS Date	Incurred	C	Date Due	Interest Rate (If none, enter ÿ31/ĭ2 <sup>Y</sup> 0.1		
List All Endorsers o 1. Full Name (Last,	or Guarantors (if any) t First, Middle Initial)	o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 1 9 1 1 A	
2. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed	-y	
3. Full Name (Last, F	First, Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y y	
4. Full Name (Last, F	First, Middle Initial)	ŀ		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9 9 9 9	
	d This Page (optional). st page in this line only			H	7 7 7	
 Carry outstanding bala	nce only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a
AME OF COMMITTEE (In Full) Coolidge For Congress			Transac	tion ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, Mid Coolidge, Leslie, , ,	Idle Initial)		Memo Item Election: 2012 Primary General	
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010	•	X Personal Funds of the Candidate
Original Amount of Loan Cumulative Payment To		yment To D	Date Balance Outstanding at Close of This Period	
1780.84		,	0.00	1780.84
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter	
M11M / D06D / Y Ž01Ž Y	M M / D D	/ Y 12	/31/12 <sup>Y</sup> 0.0	
List All Endorsers or Guarantors (if any) to	o Loan Source	•	Name of Employer	
1. Full Name (Last, First, Middle Initial)				
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	7 7 7
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	9 1 1 9 1 1 4 1
UBTOTALS This Period This Page (optional)	)			7 7 7 1780.84 7 7 7 7

lage# 201004100100100002					<b>DAOE</b> 04 05 04
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	ne (check only one) × 13a
AME OF COMMITTEE (In Ful Coolidge For Congres	,			Transac	tion ID : SC/10.4164
LOAN SOURCE Full Nam Coolidge, Leslie, , ,	e (Last, First, Mid	dle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road					Other (specify) <b>v</b>
City Barrington Hills		State IL	ZIP Code 60010	3	X Personal Funds of the Candidate
Original Amount of Loan Cumulative Payment To			yment To D	Date Bala	nce Outstanding at Close of This Perio
	30.00			0.00	30.00
TERMS Date Incurre	ed	C	Date Due	Interest Rate (If none, enter	
M12 <sup>M</sup> / D01 <sup>D</sup> / Y	Ž01Ž <sup>Y</sup>	M M / D D	/ <sup>Y</sup> 12	ý31/12 <sup>v</sup> 0.(	
List All Endorsers or Gua	rantors (if any) to	Loan Source			
1. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, N	Aiddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This				H	30.00
					vard to appropriate line of Summary.