

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

Nancy Jacobs for Congress

ADDRESS (number and street)

139 N Main Street 201

Weyrich Cronin And Sorra

Check if different than previously reported. (ACC)

Bel Air

MD

21014

2. FEC IDENTIFICATION NUMBER ▼

C C00509216

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

MD

02

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ / through / /

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

Type or Print Name of Treasurer Lesley Lookingbill

Signature of Treasurer Lesley Lookingbill

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Nancy Jacobs 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))....	15063	235045.31
(b) Total Contribution Refunds (from Line 20(d))		1700
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15063	233345.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20291.36	173418.28
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20291.36	173418.28
8. Cash on Hand at Close of Reporting Period (from Line 27).....	59926.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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 12/2003)

Write or Type Committee Name

Nancy Jacobs 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).....	10300	188135.98
(ii) Unitemized.....	2763	32945.33
(iii) TOTAL of contributions from individuals ▶	13063	221081.31
(b) Political Party Committees.....		2125
(c) Other Political Committees (such as PACs).....	2000	11839
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15063	235045.31
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15063	235045.31

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20291.36	173418.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		1700
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		1700
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20291.36	175118.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	65155.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15063
25. SUBTOTAL (add Line 23 and Line 24).....	80218.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20291.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	59926.89

**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 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Mr. R Peter Bosworth

Mailing Address 801 W St Georges Road

City Baltimore State MD Zip Code 21210

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

Name of Employer Bosworth Properties Inc. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012

Transaction ID : SA11Ai-CN1094

Amount of Each Receipt this Period
 300

B. Full Name (Last, First, Middle Initial)
Mr. Clarence C Boyle

Mailing Address 1701 E Wheel Road

City Bel Air State MD Zip Code 21015

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

Name of Employer Boyle Buick GMC Truck Occupation Auto Dealer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1048

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Ms. Irene K Boyle

Mailing Address 4 Forest Drive

City Bel Air State MD Zip Code 21014

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

Name of Employer Boyle Buick GMC Truck Occupation Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1050

Amount of Each Receipt this Period
 250

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

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

1050.00

**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 6 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Kimberly McCoy Burns

Mailing Address 201 Homewood Road

City Linthicum State MD Zip Code 21090

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

Name of Employer MD Business for Responsive Gov't Inc. Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2012

Transaction ID : SA11Ai-CN1039

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Thomas E Carroll

Mailing Address 1 Ivy Brook Farm Ct

City Cockeysville State MD Zip Code 21030

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

Name of Employer Diversified Insurance Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2012

Transaction ID : SA11Ai-CN1116

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Merrily Riha Coats

Mailing Address 1310 Glendale Rd

City Baltimore State MD Zip Code 21239

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2012

Transaction ID : SA11Ai-CN1101

Amount of Each Receipt this Period
300

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

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

800.00

**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 7 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John C Donohue

Mailing Address 5210 Patterson Farm Rd

City State Zip Code
Baldwin MD 21013

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1054

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Ms. Pat A Dresher

Mailing Address 1100 Schucks Road

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation
The Arena Club Personal Trainer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1057

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Ms. Virginia M Dresher

Mailing Address 1337 Macphail Rd E

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation
None Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2012

Transaction ID : SA11Ai-CN1113

Amount of Each Receipt this Period
1000

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

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

2250.00

**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 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Mark W Dunlap

Mailing Address 14119 Blenheim Road N

City State Zip Code
Phoenix MD 21131

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

Name of Employer Occupation
Self-employed Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1046

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Phillip Nicholas Durham

Mailing Address 2219 Conowingo Rd

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation
Phillip Durham CPA PA Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11Ai-CN1036

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Jay A Gernand

Mailing Address 1415 Martin Meadows Dr

City State Zip Code
Fallston MD 21047

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

Name of Employer Occupation
Back Flip Inc. President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1045

Amount of Each Receipt this Period
250

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

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

1000.00

**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 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Nellie C Hoskins

Mailing Address **PO Box 1501**

City **Bel Air** State **MD** Zip Code **21014**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SA11Ai-CN1052

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Daniel W Lee

Mailing Address **1116 Glastonbury Way**

City **Bel Air** State **MD** Zip Code **21014**

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

Name of Employer **MacGregor's** Occupation **Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SA11Ai-CN1051

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ms. Joan M Lozinak

Mailing Address **3021 Cool Branch Rd**

City **Churchville** State **MD** Zip Code **21028**

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

Name of Employer **BL-WC Inc** Occupation **Office Manager**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 11 / 2012

Transaction ID : SA11Ai-CN1095

Amount of Each Receipt this Period
200

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

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

700.00

**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 10 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James M Martin

Mailing Address 1815 Falstaff Road

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation
Page Appraisal Administrative Assistant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1053

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Howard K McComas IV

Mailing Address 202 Glenwood Road

City State Zip Code
Bel Air MD 21014

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

Name of Employer Occupation
McComas Funeral Home Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1049

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Charles O'brien

Mailing Address 4110 East Baker Avenue

City State Zip Code
Abingdon MD 21009

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

Name of Employer Occupation
Self-employed Contractor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2012

Transaction ID : SA11Ai-CN1092

Amount of Each Receipt this Period
1000

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

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

1500.00

**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 11 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Peter Philip Rocco Jr

Mailing Address 107 Shell Cove CT

City Joppa State MD Zip Code 21085

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

Name of Employer TS2000 LLC Occupation Manufactures Represetative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2012

Transaction ID : SA11Ai-CN1106

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Donald Ray Stephen

Mailing Address 4818 Water Park Dr

City Belcamp State MD Zip Code 21017

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1043

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Harry C Stephen

Mailing Address 2603 Stanley Dr

City Baldwin State MD Zip Code 21013

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

Name of Employer Century Engineering Occupation Civil Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012

Transaction ID : SA11Ai-CN1055

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....	750.00
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 12 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Judith L Tristani

Mailing Address 904 Southern Dr

City State Zip Code
Bel Air MD 21014

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

Name of Employer Occupation
Retired retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 11 2012

Transaction ID : SA11Ai-CN1088

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Craig Ward

Mailing Address P O Box 1861

City State Zip Code
Bel Air MD 21014

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

Name of Employer Occupation
Frederick Ward Assoc Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 04 2012

Transaction ID : SA11Ai-CN1056

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. James E Welch

Mailing Address 1356 E MacPhail Road

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation
Town Of Bel Air Public Relations Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 04 2012

Transaction ID : SA11Ai-CN1047

Amount of Each Receipt this Period
500

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

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

2000.00

**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 13 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Stephen C Winter

Mailing Address 13701 Summer Hill Dr

City State Zip Code
Phoenix MD 21131

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

Name of Employer Occupation
Layson Moller Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012

Transaction ID : SA11Ai-CN1058

Amount of Each Receipt this Period
250

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

10300.00

**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 14 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Chesapeake PAC

Full Name (Last, First, Middle Initial)
Chesapeake PAC

Mailing Address **Congressman Andy Harris Chairman**
2470 Daniells Bridge Rd Ste 121

City **Athens** State **GA** Zip Code **30606**

FEC ID number of contributing federal political committee. **C C00492819**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
1250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SA11C-CN1103

Amount of Each Receipt this Period
250

B. Conservative Victory Fund

Full Name (Last, First, Middle Initial)
Conservative Victory Fund

Mailing Address **PO Box 15245**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00009704**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 09 / 2012

Transaction ID : SA11C-CN1079

Amount of Each Receipt this Period
250

C. Republican National Coalition For Life PAC

Full Name (Last, First, Middle Initial)
Republican National Coalition For Life PAC

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. **C C00255406**

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

Transaction ID : SA11C-CN1108

Amount of Each Receipt this Period
500

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

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

1000.00

**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 15 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Wakefern Food Corp PAC

Mailing Address 33 Northfield Avenue

City Edison State NJ Zip Code 08837

FEC ID number of contributing federal political committee. **C** C00489005

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : SA11C-CN1044

Amount of Each Receipt this Period
 1000

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

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

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

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

1000.00

2000.00

**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)		PAGE 16 OF 28	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Britestar Business Solutions Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1305 B Governor Court		Amount of Each Disbursement this Period 966.69
City Abingdon	State MD	Zip Code 21009
Purpose of Disbursement printing of palm flyers	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX402	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	printing of palm flyers	

Full Name (Last, First, Middle Initial) B. Joe Sliwka		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 2320 Aquilas Delight		Amount of Each Disbursement this Period 3000.00
City Fallston	State MD	Zip Code 21047
Purpose of Disbursement campaign consultant	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX344	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	campaign consultant	

Full Name (Last, First, Middle Initial) c. Suzanne Stoltenberg		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 10522 High Rock Road		Amount of Each Disbursement this Period 167.03
City Airville	State PA	Zip Code 17302
Purpose of Disbursement reimbursement of office supplies	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX417	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	reimbursement of office supplies	

SUBTOTAL of Disbursements This Page (optional).....	4133.72
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 28	
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 2217-A Defense Highway		Amount of Each Disbursement this Period 6.36
City Crofton	State MD	Zip Code 21114
Purpose of Disbursement printing	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX404
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State:	District:	

Full Name (Last, First, Middle Initial) B. Michaels Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 8000 Bent Branch Dr		Amount of Each Disbursement this Period 10.59
City Irving	State TX	Zip Code 75063
Purpose of Disbursement picture frame	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX412
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State:	District:	

Full Name (Last, First, Middle Initial) c. Gabrielle Brothers Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 55 Scott Ave		Amount of Each Disbursement this Period 97.53
City Morgantown	State WV	Zip Code 26508
Purpose of Disbursement fund raiser supplies	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX413
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 28			
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 702 Southwest 8th Street		Amount of Each Disbursement this Period 24.10
City Bentonville	State AR	
Zip Code 72716		
Purpose of Disbursement office supplies		Category/Type 001
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) General 2012	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) B. A C Moore		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 130 A C Moore Dr		Amount of Each Disbursement this Period 11.93
City Berlin	State NJ	
Zip Code 09009		
Purpose of Disbursement fund raiser supplies		Category/Type 001
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) General 2012	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 16.52
City Framingham	State MA	
Zip Code 01702		
Purpose of Disbursement office supplies		Category/Type 001
Candidate Name		
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) General 2012	
<input type="checkbox"/> President		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 28			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Usps		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 437 L'enfant Plaza		Amount of Each Disbursement this Period 90.00
City Washington	State DC Zip Code 20026	
Purpose of Disbursement postage stamps	Category/Type 001	Transaction ID : SB17-EX384
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	postage stamps
State: District:		

Full Name (Last, First, Middle Initial) B. Usps		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 437 L'enfant Plaza		Amount of Each Disbursement this Period 225.00
City Washington	State DC Zip Code 20026	
Purpose of Disbursement postage	Category/Type 001	Transaction ID : SB17-EX399
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	postage
State: District:		

Full Name (Last, First, Middle Initial) c. Enktesis Llc		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 1603 Belvue Drive		Amount of Each Disbursement this Period 100.00
City Forest Hill	State MD Zip Code 21050	
Purpose of Disbursement campaign mgmt	Category/Type 001	Transaction ID : SB17-EX385
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	campaign mgmt
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	415.00
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 28	
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Enktesis Llc		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 1603 Belvue Drive		Amount of Each Disbursement this Period 1500.00
City Forest Hill	State MD	Zip Code 21050
Purpose of Disbursement website/campaign mgmt	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX386	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	website/campaign mgmt
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 32 Avenue of The Americas		Amount of Each Disbursement this Period 79.20
City New York	State NY	Zip Code 10013
Purpose of Disbursement utilities	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX369	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	utilities
State: District:		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address One Comcast Center		Amount of Each Disbursement this Period 87.63
City Philadelphia	State PA	Zip Code 19103
Purpose of Disbursement utilities	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX367	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	utilities
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1666.83
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 21 OF 28			
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 41.62
City Framingham State MA Zip Code 01702	Purpose of Disbursement office supplies	Transaction ID : SB17-EX379
Candidate Name	Category/Type 001	office supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 59.34
City Framingham State MA Zip Code 01702	Purpose of Disbursement office supplies	Transaction ID : SB17-EX398
Candidate Name	Category/Type 001	office supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) c. State Farm		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 1500 Blenheim Farm Lane		Amount of Each Disbursement this Period 34.25
City Havre De Grace State MD Zip Code 21078	Purpose of Disbursement insurance	Transaction ID : SB17-EX403
Candidate Name	Category/Type 001	insurance
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	135.21
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 22 OF 28			
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Weyrich Cronin & Sorra			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 139 N Main St 201			Amount of Each Disbursement this Period 1300.00
City Bel Air	State MD	Zip Code 21014	Transaction ID : SB17-EX405
Purpose of Disbursement accounting/bookkeeping services		001 Category/ Type	
Candidate Name			accounting/bookkeeping services
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State: District:			

Full Name (Last, First, Middle Initial) B. VANCO Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 12600 Whitewater Drive			Amount of Each Disbursement this Period 27.95
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX370
Purpose of Disbursement merchant fees		001 Category/ Type	
Candidate Name			merchant fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State: District:			

Full Name (Last, First, Middle Initial) c. VANCO Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 12600 Whitewater Drive			Amount of Each Disbursement this Period 40.84
City Minnetonka	State MN	Zip Code 55343	Transaction ID : SB17-EX406
Purpose of Disbursement merchant fees		001 Category/ Type	
Candidate Name			merchant fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1368.79
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 23 OF 28	
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 21.27
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement merchant fees	Transaction ID : SB17-EX376
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

Full Name (Last, First, Middle Initial) B. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 8.47
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement merchant fees	Transaction ID : SB17-EX377
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

Full Name (Last, First, Middle Initial) c. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 4.11
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement merchant fees	Transaction ID : SB17-EX378
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	33.85
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 24 OF 28	
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 8.01
City Minnetonka	State MN	
Purpose of Disbursement merchant fees	Zip Code 55343	Transaction ID : SB17-EX389
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

Full Name (Last, First, Middle Initial) B. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 4.58
City Minnetonka	State MN	
Purpose of Disbursement merchant fees	Zip Code 55343	Transaction ID : SB17-EX392
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

Full Name (Last, First, Middle Initial) c. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 3.20
City Minnetonka	State MN	
Purpose of Disbursement merchant fees	Zip Code 55343	Transaction ID : SB17-EX391
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	merchant fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15.79
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 25 OF 28			
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 22.00
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement merchant fees	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX393	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	merchant fees	

Full Name (Last, First, Middle Initial) B. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 19.40
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement merchant fees	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX394	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	merchant fees	

Full Name (Last, First, Middle Initial) c. VANCO Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 12600 Whitewater Drive		Amount of Each Disbursement this Period 1.14
City Minnetonka	State MN	Zip Code 55343
Purpose of Disbursement merchant fees	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX396	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:	merchant fees	

SUBTOTAL of Disbursements This Page (optional).....	42.54
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 26 OF 28			
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 2455 Paces Ferry Road NW		Amount of Each Disbursement this Period 422.14
City Atlanta	State GA Zip Code 30339	
Purpose of Disbursement campaign sign supplies - posts	Category/Type 001	Transaction ID : SB17-EX373
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	campaign sign supplies - posts
State: District:		

Full Name (Last, First, Middle Initial) B. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 2455 Paces Ferry Road NW		Amount of Each Disbursement this Period 23.29
City Atlanta	State GA Zip Code 30339	
Purpose of Disbursement campaign sign supplies - screws	Category/Type 001	Transaction ID : SB17-EX374
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	campaign sign supplies - screws
State: District:		

Full Name (Last, First, Middle Initial) c. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 2455 Paces Ferry Road NW		Amount of Each Disbursement this Period 84.74
City Atlanta	State GA Zip Code 30339	
Purpose of Disbursement solar lights for campaign sign	Category/Type 001	Transaction ID : SB17-EX382
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	solar lights for campaign sign
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	530.17
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 27 OF 28	
	<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)
Nancy Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Hillendale Country Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012	
Mailing Address 13700 Blenheim Rd			Amount of Each Disbursement this Period 2657.43	
City Phoenix	State MD	Zip Code 21131	Transaction ID : SB17-EX401	
Purpose of Disbursement campaign event 10-2-12		Category/ Type 001	campaign event 10-2-12	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. WBAL-TV11			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012	
Mailing Address 3800 Hooper Ave			Amount of Each Disbursement this Period 5227.50	
City Baltimore	State MD	Zip Code 21211	Transaction ID : SB17-EX442	
Purpose of Disbursement campaign commercial air time		Category/ Type 001	campaign commercial air time	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. WJZ Television			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012	
Mailing Address 3725 Malden Ave Television Hill			Amount of Each Disbursement this Period 3791.00	
City Baltimore	State MD	Zip Code 21211	Transaction ID : SB17-EX443	
Purpose of Disbursement campaign commercial air time		Category/ Type 001	campaign commercial air time	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	11675.93
TOTAL This Period (last page this line number only).....	20017.83

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Nancy Jacobs for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
State Farm

Mailing Address 1500 Blenheim Farm Lane

City State Zip Code
 Havre De Grace MD 21078

Nature of Debt (Purpose):
 Invoice: insurance

Outstanding Balance Beginning This Period **Transaction ID : SD9-INV168**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
State Farm

Mailing Address 1500 Blenheim Farm Lane

City State Zip Code
 Havre De Grace MD 21078

Nature of Debt (Purpose):
 Invoice: insurance

Outstanding Balance Beginning This Period **Transaction ID : SD9-INV169**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>