

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

Roraback for Congress

ADDRESS (number and street)

PO Box 807

Check if different than previously reported. (ACC)

Torrington

CT

06790

2. FEC IDENTIFICATION NUMBER

C C00504985

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CT

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on 11 / 06 / 2012 in the State of CT

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

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

Election on 11 / 06 / 2012 in the State of CT

5. Covering Period

04 / 01 / 2012 through 04 / 28 / 2012

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 Anna-Elysapeth McGuire

Signature of Treasurer Anna-Elysapeth McGuire

[Electronically Filed]

Date

05 / 04 / 2012

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

Table with 7 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Roraback 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))....	50965.00	422959.08
(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)).....	50965.00	422959.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	44382.97	147900.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44382.97	147900.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	267558.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Roraback 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).....	47580.00	380535.28
(ii) Unitemized.....	3385.00	42423.80
(iii) TOTAL of contributions from individuals ▶	50965.00	422959.08
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50965.00	422959.08
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	50965.00	422959.08

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44382.97	147900.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	7500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	44382.97	155400.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	260976.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50965.00
25. SUBTOTAL (add Line 23 and Line 24).....	311941.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44382.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	267558.59

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

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

FOR LINE NUMBER: PAGE 5 OF 35
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
LINDA ALLARD

Mailing Address **P.O. BOX 1197**

City **WASHINGTON** State **CT** Zip Code **06793-0197**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1062

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH D. ANDERSON

Mailing Address **41045 STUMPTOWN RD**

City **WATERFORD** State **VA** Zip Code **20197-1250**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11.987

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HILJA M. BAYLOR

Mailing Address **P.O. BOX 1738**

City **SHARON** State **CT** Zip Code **06069-1738**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1016

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

2500.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
SUSAN BEVAN

Mailing Address 90 FIELD POINT CIRCLE

City GREENWICH State CT Zip Code 06830-7011

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

Name of Employer N/A Occupation N/A

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 26 / 2012

Transaction ID : SA11.1033

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANN L. BOOTH

Mailing Address 72 ALLYN ROAD

City GOSHEN State CT Zip Code 06756-1312

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

Name of Employer RETIRED Occupation N/A

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11.976

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. BORGHESI

Mailing Address 287 WINDTREE

City TORRINGTON State CT Zip Code 06790-7907

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11.993

Amount of Each Receipt this Period
1200.00
CONTRIBUTION

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

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

1800.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
RICHARD BOUVIER

Mailing Address 111 ORCHARD RD

City WEST HARTFORD State CT Zip Code 06117-2914

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

Name of Employer BOUVIER INSURANCE Occupation INSURANCE AGENT

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1059

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 150 BALFOUR DRIVE

City WEST HARTFORD State CT Zip Code 06117-2900

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

Name of Employer BOUVIER INSURANCE Occupation PRESIDENT

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1056

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 9074 LAKES BLVD

City WEST PALM BEACH State FL Zip Code 33412-1560

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 26 / 2012

Transaction ID : SA11.1022

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

750.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. ANN M. BURTON

Mailing Address **7 SOUTH STREET**
P.O. BOX 1417

City **WASHINGTON** State **CT** Zip Code **06793-1516**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: **012**
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1083

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address **P.O. BOX 877**

City **SHARON** State **CT** Zip Code **06069-0877**

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

Name of Employer **SELF** Occupation **FARMER**

Receipt For: **012**
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1014

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. J. BARCLAY COLLINS II

Mailing Address **KING HOUSE 12 NORTH MAIN STREET**
P.O. BOX 1127

City **SHARON** State **CT** Zip Code **06069-2074**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: **012**
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1034

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1100.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
DENISE B. DESMARAIS

Mailing Address **27 BALFOUR DR**

City **WEST HARTFORD** State **CT** Zip Code **06117-2936**

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

Name of Employer **BOUVIER INSURANCE** Occupation **INSURANCE AGENT**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1058

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARTHUR HILL DIEDRICK

Mailing Address **P.O. BOX 37**
P.O. BOX 37

City **LITCHFIELD** State **CT** Zip Code **06759-0037**

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

Name of Employer **SELF** Occupation **COMMUNICATIONS**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **6000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11.1006

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11.1011

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

3250.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1038

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1038B

Amount of Each Receipt this Period
-2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO PRIMARY**

C. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1087B

Amount of Each Receipt this Period
-240.04

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

3000.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1088

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM CONVENTION**

B. Full Name (Last, First, Middle Initial)
JANE P. DOWLING

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5240.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1090

Amount of Each Receipt this Period
240.04

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM CONVENTION**

C. Full Name (Last, First, Middle Initial)
KARA LEIGH DOWLING

Mailing Address **P.O. BOX 357**

City **GOSHEN** State **CT** Zip Code **06756-0357**

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

Name of Employer **BRADLEY FOSTER AND SARGENT** Occupation **MARKETING**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11.1013

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

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

5000.00

**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 12 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
KARA LEIGH DOWLING

Mailing Address P.O. BOX 357

City State Zip Code
GOSHEN CT 06756-0357

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

Name of Employer Occupation
BRADLEY FOSTER AND SARGENT MARKETING

Receipt For: 012 Election Cycle-to-Date
 Primary General
 Other (specify) **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 20 2012

Transaction ID : SA11.1013B

Amount of Each Receipt this Period
-2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO PRIMARY**

B. Full Name (Last, First, Middle Initial)
KARA LEIGH DOWLING

Mailing Address P.O. BOX 357

City State Zip Code
GOSHEN CT 06756-0357

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

Name of Employer Occupation
BRADLEY FOSTER AND SARGENT MARKETING

Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 20 2012

Transaction ID : SA11.1075

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM CONVENTION**

C. Full Name (Last, First, Middle Initial)
KARA LEIGH DOWLING

Mailing Address P.O. BOX 357

City State Zip Code
GOSHEN CT 06756-0357

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

Name of Employer Occupation
BRADLEY FOSTER AND SARGENT MARKETING

Receipt For: 2012 Election Cycle-to-Date
 Primary General
 Other (specify) **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 27 2012

Transaction ID : SA11.1041

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 35
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
NICHLOAS DOWNES

Mailing Address P.O. BOX 603

City State Zip Code
KENT CT 06757-0603

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

Name of Employer Occupation
RHWET - SIBLEY EQUIP CORP MGT

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11.981

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAPHNE S. DRURY

Mailing Address P.O. BOX 127

City State Zip Code
CANAAAN CT 06018-0127

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC HOME MAKER

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11.979

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 59 GARRETT ROAD

City State Zip Code
CANTON CT 06019-2107

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

Name of Employer Occupation
DUCCI ELECTRICAL CONTRACTORS INC ELECTRICIAL CONTRACTOR

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : SA11.973

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

600.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
GRETCHEN H. FARMER

Mailing Address 191 POPPLE SWAMP RD

City WASHINGTON DEPOT State CT Zip Code 06794-1011

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

Name of Employer SELF EMPLOYED Occupation BED AND BREAKFAST

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11.1000

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J. WINSTON FOWLKES III

Mailing Address P.O. BOX 1232

City WASHINGTON State CT Zip Code 06793-0232

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

Name of Employer SELF Occupation RETIRED

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11.1005

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CAROL-ANN FUSS

Mailing Address 15 RHYNUS RD

City SHARON State CT Zip Code 06069-2033

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1018

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1750.00

**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 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ALICE GISH

Mailing Address **4 HIDDEN BROOK DR**

City **BROOKFIELD** State **CT** Zip Code **06804-1306**

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

Name of Employer **JACK GISH DDS ASSOCIATES** Occupation **CORP DIRECTOR**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11.1001

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM A. HAMZY

Mailing Address **2 MINOR ROAD**

City **TERRYVILLE** State **CT** Zip Code **06786-4002**

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

Name of Employer **THE HAMZY LAW FIRM, LLC** Occupation **ATTORNEY**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1071

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN A. HERRMANN JR.

Mailing Address **1105 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10128-1200**

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

Name of Employer **LINCOLN FINANCIAL** Occupation **MANAGEMENT**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11.1003

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1750.00

**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 16 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
FRANCES E. ILANY ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1076

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANCES E. ILANY ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1076B

Amount of Each Receipt this Period
-2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO CONVENTION**

C. Full Name (Last, First, Middle Initial)
FRANCES E. ILANY ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1077B

Amount of Each Receipt this Period
-2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO PRIMARY**

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

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

7500.00

**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 17 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
FRANCES E. ILANY ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1078

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM GENERAL**

B. Full Name (Last, First, Middle Initial)
FRANCES E. ILANY ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1080

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. JONATHAN ILANY

Mailing Address **212 GRANTVILLE ROAD**

City **WINSTED** State **CT** Zip Code **06098-2404**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1039

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

2500.00

**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 18 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JULIANE INGHAM

Mailing Address 97 ELM ST

City THOMASTON State CT Zip Code 06787-1705

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

Name of Employer SELF Occupation STATE MARSHALL

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1065

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
OTTO A. KALETSCH

Mailing Address 193 WEST CORNWALL ROAD
P.O. BOX 255

City WEST CORNWALL State CT Zip Code 06796-1026

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

Name of Employer RETIRED Occupation N/A

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1037

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD L. KATZIN

Mailing Address P.O. BOX 2

City GOSHEN State CT Zip Code 06756-0002

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11.988

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

850.00

**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 19 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
KEVIN C. KELLY

Mailing Address **240 YORK ST**

City **STRATFORD** State **CT** Zip Code **06615-7952**

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

Name of Employer **BISHOP, JACKSON & KELLY** Occupation **ATTORNEY**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1061

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NANCY M. KISSINGER

Mailing Address **PO BOX 38**
HENDERSON RD

City **KENT** State **CT** Zip Code **06757-0038**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1015

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. NICHOLAS V. LABBADIA

Mailing Address **576 STEELE RD**

City **NEW HARTFORD** State **CT** Zip Code **06057-3102**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11.1008

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

2100.00

**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 20 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. DAN LUFKIN

Mailing Address **36 HINKLE RD.**

City **WASHINGTON** State **CT** Zip Code **06793-1001**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11.985

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER A. METZ

Mailing Address **99 BISHOP LANE**

City **MADISON** State **CT** Zip Code **06443-3380**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1042

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND R. ONEGLIA

Mailing Address **70 CARRIAGE LANE**

City **LITCHFIELD** State **CT** Zip Code **06759-2327**

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

Name of Employer **O & G** Occupation **CONSTRUCTION EXEC.**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11.1007

Amount of Each Receipt this Period
1500.00
 CONTRIBUTION

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

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

2750.00

**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 21 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. ANN B. PATTON

Mailing Address **P.O. BOX 1566**

City **LAKEVILLE** State **CT** Zip Code **06039-1566**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 27 / 2012

Transaction ID : SA11.1036

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID H. PILON

Mailing Address **5 LANGLEY PARK**

City **FARMINGTON** State **CT** Zip Code **06032-1541**

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

Name of Employer **BOURIER INSURANCE** Occupation **INSURANCE SALES**

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11.1057

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES PRESTON

Mailing Address **P.O. BOX 803**

City **LITCHFIELD** State **CT** Zip Code **06759-0803**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11.992

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

3250.00

**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 22 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
LUCIA R. PUTNAM

Mailing Address 935 PHEN BASIN RD.

City State Zip Code
FAYSTON VT 05673-7101

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11.986

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERTA J. SMITH

Mailing Address P.O. BOX 2008

City State Zip Code
NEW PRESTON CT 06777-0008

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

Name of Employer Occupation
SELF EMPLOYED PRODUCER

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11.978

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN E. STRIPP

Mailing Address 4 SCATACOOK TRAIL

City State Zip Code
WESTON CT 06883-1312

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

Name of Employer Occupation
FAIRFIELD COUNTY BANK BANKER

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1020

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1750.00

**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 23 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN WYATT UHLEIN

Mailing Address 19 SAW MILL ROAD

City LITCHFIELD State CT Zip Code 06759-2001

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

Name of Employer RETIRED Occupation N/A

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2012

Transaction ID : SA11.1030

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

Mailing Address 58 GOOD HILL RD

City WOODBURY State CT Zip Code 06798-2624

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

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

Transaction ID : SA11.974

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address 48 NORTH ST

City WATERTOWN State CT Zip Code 06795-2106

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

Name of Employer IMTI Occupation EOU

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11.1017

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

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

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

2300.00

**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 24 OF 35
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ARETHUSA FARM LLC

Mailing Address 552 S. PLAINS ROAD

City LITCHFIELD State CT Zip Code 06759-4010

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

Name of Employer Occupation

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2012

Transaction ID : SA11.1024

Amount of Each Receipt this Period
 580.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

Mailing Address

City LITCHFIELD State CT Zip Code 06759

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

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2012

Transaction ID : SA11.1027

Amount of Each Receipt this Period
 290.00

CONTRIBUTION

[MEMO ITEM]

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

Mailing Address 31 WEST 54TH ST

City NEW YORK State NY Zip Code 10019-5404

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

Name of Employer Occupation
 MANOLO BLAHNIK USA, LTD PARTNER

Receipt For: 012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2012

Transaction ID : SA11.1026

Amount of Each Receipt this Period
 290.00

CONTRIBUTION

[MEMO ITEM]

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

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

580.00

47580.00

**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 25 OF 35		
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. ATT		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address P.O box 5082		Amount of Each Disbursement this Period 808.07
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE	Transaction ID : 2261
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ATT		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O box 5082		Amount of Each Disbursement this Period 59.35
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement U Verse	Transaction ID : DW11
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)	
State: District:		

Full Name (Last, First, Middle Initial) c. Roma Resturant		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 179 Davis Street		Amount of Each Disbursement this Period 597.93
City Watertown	State CT	
Zip Code 06779	Purpose of Disbursement Event	Transaction ID : 1981
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	808.07
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 35	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Chris Dupont		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 1150.58 Transaction ID : 2001
City Watertown	State CT	
Zip Code 06795	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Chris DuPont		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 1150.58 Transaction ID : 2021
City Watertown	State CT	
Zip Code 06795	Purpose of Disbursement payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chris DuPont		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 278.66 Transaction ID : 2071
City Watertown	State CT	
Zip Code 06795	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2579.82
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 35	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Walter Kidd		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 22c Heritage Village		Amount of Each Disbursement this Period 119.25
City Southbury State CT Zip Code 06795	Purpose of Disbursement Photographer 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 2031
State: District:		

Full Name (Last, First, Middle Initial) B. Walter Kidd		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 22c Heritage Village		Amount of Each Disbursement this Period 128.05
City Southbury State CT Zip Code 06488	Purpose of Disbursement photographer 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 2191
State: District:		

Full Name (Last, First, Middle Initial) c. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 49 ALLYNDAL ROAD		Amount of Each Disbursement this Period 1123.00
City CANAAN State CT Zip Code 06018	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 2011
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1370.30
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 28 OF 35			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 1123.00 Transaction ID : 2101
City CANAAN	State CT	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mike Wilson		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address		Amount of Each Disbursement this Period 100.00 Transaction ID : 1991
City West Hartford	State CT	
Purpose of Disbursement Music		Category/ Type 007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Adams Samartino		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address P.O. Box 942 32 City Hall Avenue		Amount of Each Disbursement this Period 4000.00 Transaction ID : 2301
City Torrington	State CT	
Purpose of Disbursement Accounting Services		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5223.00
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 29 OF 35	
	<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)
Roraback for Congress

A. AdComm

Full Name (Last, First, Middle Initial)
Mailing Address **ASHLEY FALLS ROAD**

City **CANAAN** State **CT** Zip Code **06018**

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District: **00**

Date of Disbursement
04 / 28 / 2012

Amount of Each Disbursement this Period
115.12

Transaction ID : **2241**

Category/Type: **001**

B. Align Media LLC

Full Name (Last, First, Middle Initial)
Mailing Address **921 Cavalry Ride Trail**

City **AUSTIN** State **TX** Zip Code **78732**

Purpose of Disbursement
web/Internet services

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
04 / 17 / 2012

Amount of Each Disbursement this Period
2050.00

Transaction ID : **2121**

Category/Type: **001**

C. ATT Mobility

Full Name (Last, First, Middle Initial)
Mailing Address **P.O. BOX 6463**

City **CAROL STREAM** State **IL** Zip Code **60197-6463**

Purpose of Disbursement
cell phone

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
04 / 28 / 2012

Amount of Each Disbursement this Period
142.67

Transaction ID : **2221**

Category/Type: **001**

SUBTOTAL of Disbursements This Page (optional)..... **2307.79**

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 30 OF 35	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial)
A. ATT U Verse

Mailing Address P.O. Box 5082

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Internet

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 28 / 2012

Amount of Each Disbursement this Period: 30.00

Transaction ID : 2231

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Commission of Revenue Service

Mailing Address 25 Sigourney Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 04 / 2012

Amount of Each Disbursement this Period: 79.21

Transaction ID : DW21

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Commission of Revenue Service

Mailing Address 25 Sigourney Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement payroll withholding

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 18 / 2012

Amount of Each Disbursement this Period: 77.61

Transaction ID : DW61

Category/Type:

SUBTOTAL of Disbursements This Page (optional) 186.82

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 31 OF 35		
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Downtown Partner		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address Main Street		Amount of Each Disbursement this Period 985.00
City Torrington	State CT Zip Code 06790	
Purpose of Disbursement Rent	Category/Type 001	Transaction ID : 2021a
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address P.O. Box 371461		Amount of Each Disbursement this Period 77.80
City Pittsburg	State PA Zip Code 15122	
Purpose of Disbursement postage	Category/Type 001	Transaction ID : 2251
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. IRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 661.41
City Andover	State MA Zip Code 05501	
Purpose of Disbursement payroll Withholding	Category/Type 001	Transaction ID : DW41
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1724.21
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 32 OF 35	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address		Amount of Each Disbursement this Period 661.41
City Andover	State MA	
Zip Code 05501		Transaction ID : DW51
Purpose of Disbursement payroll withholding	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. National Research		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 146 State Highway 34 Suite 250		Amount of Each Disbursement this Period 7500.00
City Holmdel	State NJ	
Zip Code 07733		Transaction ID : 2041
Purpose of Disbursement Polling	Category/ Type 005	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. National Research		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 146 State Highway 34 Suite 250		Amount of Each Disbursement this Period 6912.00
City Holmdel	State NJ	
Zip Code 07733		Transaction ID : 2131
Purpose of Disbursement Polling	Category/ Type 005	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15073.41
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 33 OF 35			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 7000.00
City FAIRFIELD	State CT	
Zip Code 06825	Purpose of Disbursement Fundraising	Transaction ID : 2111
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shirt Bakery		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 75 Commercial Street		Amount of Each Disbursement this Period 2760.00
City Watertown	State CT	
Zip Code 06795	Purpose of Disbursement Shirts	Transaction ID : 2151
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sir Speedy		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 434.09
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement printing	Transaction ID : 2271
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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10194.09
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 34 OF 35			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 82.92
City Torrington State CT Zip Code 06790	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : 2081
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 77.61
City Torrington State CT Zip Code 06790	Purpose of Disbursement office supplies 001 Category/Type	
Candidate Name		Transaction ID : 2161
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 72.38
City Torrington State CT Zip Code 06790	Purpose of Disbursement office Supplies 001 Category/Type	
Candidate Name		Transaction ID : 2171
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	232.91
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 35 OF 35	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address EAST ELM STREET		Amount of Each Disbursement this Period 582.55 Transaction ID : 2181
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CT Republicans Federal		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address Pratt Street		Amount of Each Disbursement this Period 1600.00 Transaction ID : 2051
City Hartford	State CT	
Zip Code	Purpose of Disbursement Convention Space	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. CT Republicans Federal		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address Pratt Street		Amount of Each Disbursement this Period 2500.00 Transaction ID : 2061
City Hartford	State CT	
Zip Code	Purpose of Disbursement Bush Dinner	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4682.55
TOTAL This Period (last page this line number only).....	44382.97