Image#	202401	299600	464243
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PAGE 1 / 24

FEC FORM 3		ID DIS		CEIPTS MENTS			Office Use Only
1. NAME OF COMMITTEE (in		PE OR PRINT		Example: If typing	g, type	12FE4M5	
Coolidge For (Congress						
ADDRESS (number ar		45 Old Sutton F	Road				
Check if dif than previou reported. (A	usly I E	Barrington				IL	60010
			CITY 🔺		<u> </u>	STATE	
2. FEC IDENTIFIC		BER ▼	3. IS THIS REPORT	× NEW (N)	OR	AMENE (A)	DED STATE ▼ DISTRICT
	eports: 5 Quarterly Repo	ort (Q1)	(b) 12-Day PF	RE -Election Repo Primary (12P) Convention ([*]		General (1 Special (1	
	Quarterly Repo r 15 Quarterly F		Election of	m m /	D D /	Y Y Y Y	in the State of
× January	/ 31 Year-End R	eport (YE)	(c) 30-Day P(DST -Election Rep General (30G		Runoff (30)R) Special (30S)
Termina	ation Report (TE	R)	Election of	m m /	D D /	Y Y Y Y	in the State of
5. Covering Period	10 M	/ D D /	Y Y Y Y 2023	through	M M 12	/ D D / 31	Y Y Y Y 2023
I certify that I have e Type or Print Name		Report and to t Coolidge, Lesli	-	knowledge and l	belief it is tr	rue, correct and	d complete.
Signature of Treasure	Coolidge er	e, Leslie, , ,			[Date	/ D_D / Y Y Y Y 29 / 2024
NOTE: Submission of	false, erroneous	, or incomplete	information ma	y subject the pers	son signing	this Report to th	ne penalties of 52 U.S.C. §30109
Office Use Only							FEC FORM 3 (Revised 05/2016)

Image# 202401299600464244

IIIIe	iye# /	202401233000404244		
Γ	_	FEC Form 3 (Revised 03/2016)	SUMMARY PAGE of Receipts and Disbursements	
		or Type Committee Name Iidge For Congress		
R	lepor	t Covering the Period: From:	10 ^M / 01 ^D / Y Y Y Y 2023 To:	M 12 / 31 / Y Y Y Y 2023 Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	120.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	15.41
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	104.59
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	143008.02	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

Image#	202401299600464245	
magem		

Γ	FEC Form 3 (Revised 05/2016)	DETAILED SUMMARY PAGE of Receipts	Г
Write	e or Type Committee Name		
Сс	oolidge For Congress		
Repo	ort Covering the Period: From:	10 / D D / Y Y Y Y 10 01 / 2023 To:	M M / D D / Y Y Y Y 12 31 2023
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
(b	, ,	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d (e	,	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	, , , , 0.00
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00
13. L((a		0.00	0.00
(b) All Other Loans	0.00	0.00
(C	, 	0.00	0.00
E	FFSETS TO OPERATING XPENDITURES Refunds, Rebates, etc.)	0.00	15.41
	THER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	15.41

Image# 202401299600464246

FEC Form 3 (Revised 05/2016)

DETAILED SUMMARY PAGE

of Disbursements

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

III. CASH SUMMARY

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

			r	PAGE 5 OF 24			
SCHEDULE C (FEC Form 3) _OANS			Use separate schedule(s) for each category of the Detailed Summary Page				
ME OF COMMITTEE (In Full)			Transa	ction ID : SC/10.4139			
coolidge For Congress							
LOAN SOURCE Full Name (Last, First, Mi	iddle Initial)		Memo Item				
Coolidge, Leslie, , ,				Primary General			
Mailing Address 345 Old Sutton Road				Other (specify) ▼			
City	State	ZIP Code	Э				
Barrington Hills	IL	60010		X Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	ayment To D	Date Bal	ance Outstanding at Close of This Peric			
13540.04			1500.00	12040.04			
TERMS Date Incurred		Date Due	Interest Rat (If none, ente				
M 10 / D D / Y Y Y Y 10 / 18 / 2011	M M / D		V V V	.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source	;					
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City State	ZIP Code		Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City State	ZIP Code		Guaranteed Outstanding:	g			
4. Full Name (Last, First, Middle Initial)	I		Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1			
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line on			<u> </u>	12040.04			

SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4138			
Coolidge For Congress								
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)		Memo Item	Election: 2012			
Coolidge, Leslie, , ,					Primary General			
Mailing Address 345 Old Sutton Road					Other (specify) v			
City		State	ZIP Code	Э				
Barrington Hills		IL	60010		X Personal Funds of the Candidat			
Original Amount of Loan	0.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio			
TERMS Date Incurred			Date Due	Interest Rate				
M M / D D / Y Y Y 11 08 2011	Y	M M / D D	/ Y 12	(If none, enter //31/12 0.0				
List All Endorsers or Guarantors	(if any) t	o Loan Source						
1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
2. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
3. Full Name (Last, First, Middle Ir	nitial)	•		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	g			
4. Full Name (Last, First, Middle Ir	nitial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y			
SUBTOTALS This Period This Page (H	100.00			
TOTALS This Period (last page in this Carry outstanding balance only to LI					vard to appropriate line of Summary.			

SCHEDULE C (FEC Form 3) LOANS			Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4137		
Coolidge For Congress							
LOAN SOURCE Full Name (Last,	First, Mic	ddle Initial)		Memo Item	Election: 2012		
Coolidge, Leslie, , ,					Primary General		
Mailing Address 345 Old Sutton Road					Other (specify)		
City		State	ZIP Code	e			
Barrington Hills		IL	60010		Personal Funds of the Candidat		
Original Amount of Loan	0.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio		
TERMS Date Incurred		C	Date Due	Interest Rate			
12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y	M M / D D	/ Y 12	(If none, enter 1/31/12 0.0	00 % (apr) Yes X No		
List All Endorsers or Guarantors	(if any) t	o Loan Source					
1. Full Name (Last, First, Middle	Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y		
2. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
3. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
4. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
CUBTOTALS This Period This Page				H	, 500.00		
Carry outstanding balance only to L	INE 3, Scl	hedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.		

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page					
AME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4142			
Coolidge For Congress							
LOAN SOURCE Full Name (Last, First, I	Middle Initial)		Memo Item	Election: 2012			
Coolidge, Leslie, , ,				Primary General			
Mailing Address 345 Old Sutton Road				Other (specify)			
City	State	ZIP Code)				
Barrington Hills	IL	60010		Y Personal Funds of the Candidat			
Original Amount of Loan 5154.15	Cumulative Pa	ayment To D	0.00 Bala	nce Outstanding at Close of This Perio			
TERMS Date Incurred	[Date Due	Interest Rate				
01 / DDD / Y Y Y Y 2012	M M / D C	D / Y 12	(If none, enter //31/12 0.0				
List All Endorsers or Guarantors (if any) to Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y y			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y y			
4. Full Name (Last, First, Middle Initial)	ļ		Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y			
UBTOTALS This Period This Page (optiona	al)			5154.15			
OTALS This Period (last page in this line of Carry outstanding balance only to LINE 3, 5				vard to appropriate line of Summary			

lage# 20240125500	0404231					
SCHEDULE C (FEC Form 3) LOANS			Use separate schedul for each category of t Detailed Summary Pag	the (check only one) X 13a		
AME OF COMMIT	TEE (In Full)			Transac	ction ID : SC/10.4141	
Coolidge For Co	ongress					
LOAN SOURCE	Full Name (Last, First, Mid	ddle Initial)		Memo Item	Election: 2012	
Coolidge, Le	eslie, , ,				Primary General	
Mailing Address 345 Old Sutton R	oad				Other (specify) ▼	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidate	
Original Amour	nt of Loan	Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio	
	11000.00	9		0.00	11000.00	
TERMS	Date Incurred		Date Due	Interest Rate (If none, ente		
M M / D	23 / Y Y Y Y 2012	M M / D		V V V	.00 % (apr) Yes X No	
List All Endorse	ers or Guarantors (if any) t	o Loan Source	e			
1. Full Name (L	ast, First, Middle Initial)			Name of Employer		
Mailing Addr	ress			Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (La	ast, First, Middle Initial)			Name of Employer		
Mailing Addre	ess			Occupation		
			-	Amount		
City	State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (La	ast, First, Middle Initial)			Name of Employer		
Mailing Addre	255			Occupation		
City	State	ZIP Code		Amount Guaranteed		
				Outstanding:		
4. Full Name (La	ast, First, Middle Initial)			Name of Employer		
Mailing Addre	ess			Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1	
	Period This Page (optional). Ind (last page in this line only				11000.00	
Carry outstanding	balance only to LINE 3, Sci	nedule D, for th	is line. If no	o Schedule D, carry for	ward to appropriate line of Summary.	

SCHEDULE C (FEC I LOANS	Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page			
NAME OF COMMITTEE (In Full	l)			Transac	tion ID : SC/10.4140	
Coolidge For Congress						
LOAN SOURCE Full Name	e (Last, First, Mid	dle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					Primary General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City		State	ZIP Code	9		
Barrington Hills		IL	60010		X Personal Funds of the Candidate	
Original Amount of Loan	15000.00	Cumulative Pa	yment To D	0.00 Bala	nce Outstanding at Close of This Period 15000.00	
TERMS Date Incurre	d	C	Date Due	Interest Rate (If none, enter		
M M / D D / Y	2012 Y	/ M / D D	/ Y 12	/31/12 0.0		
List All Endorsers or Guar	rantors (if any) to	Loan Source				
1. Full Name (Last, First, N	Viddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount Guaranteed		
City	State	ZIP Code			9 9 9 9 9 9	
3. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	City State ZIP Code			Amount Guaranteed Outstanding:	ng 1 1 ng 1 1 ng 1	
4. Full Name (Last, First, N	liddle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7	
SUBTOTALS This Period This TOTALS This Period (last pag				H	15000.00 7 7 7	
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4143	
Coolidge For Congress						
LOAN SOURCE Full Name (Last, F	irst, Mic	ddle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					Primary General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidat	
Original Amount of Loan 15900.9	95	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio	
TERMS Date Incurred		C	Date Due	Interest Rate		
M 03 / D D / Y Y Y Y 2012	Y	M M / D D	/ Y 12	(If none, enter //31/12 0.0		
List All Endorsers or Guarantors (in	f any) t	o Loan Source				
1. Full Name (Last, First, Middle Ini	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Middle Initi	ial)			Name of Employer		
Mailing Address				Occupation		
		1		Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9	
3. Full Name (Last, First, Middle Initi	ial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initi	ial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Page (or	otional).				15900.95	
TOTALS This Period (last page in this l					and to appropriate line of Summary	

CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	$\frac{1}{10}$ (check only one) X 13a
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4146
Coolidge For Congress					
LOAN SOURCE Full Name (Last, Firs	st, Midd	lle Initial)		Memo Item	Election: 2012
Coolidge, Leslie, , ,					Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City	5	State	ZIP Cod	e	
Barrington Hills		IL	60010		X Personal Funds of the Candidate
Original Amount of Loan 653.85		Cumulative Pa	yment To [Date Bala	nce Outstanding at Close of This Peric 653.85
TERMS Date Incurred		C	Date Due	Interest Rate	
M M / D D / Y Y Y Y 03 / 07 / 2012	М	M / D D	/ Y 12	(If none, enter 2/31/12 0.0	
List All Endorsers or Guarantors (if a	any) to	Loan Source			
1. Full Name (Last, First, Middle Initia	al)			Name of Employer	
Mailing Address				Occupation	
City	ate	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)	I)	•		Name of Employer	
Mailing Address				Occupation	
				Amount Guaranteed	
City Sta	ate	ZIP Code			y y y
3. Full Name (Last, First, Middle Initial)	I)	•		Name of Employer	
Mailing Address				Occupation	
City Sta	ate	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)	I)			Name of Employer	
Mailing Address				Occupation	
City	ate	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This Page (optic	ional)			······	653.85
TOTALS This Period (last page in this lin Carry outstanding balance only to LINE :					and to appropriate line of Summory

SCHEDULE C (FEC For LOANS	m 3)		Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4144
Coolidge For Congress					
LOAN SOURCE Full Name (La	ast, First, Mic	ddle Initial)		Memo Item	Election: 2012
Coolidge, Leslie, , ,					Primary General
Mailing Address 345 Old Sutton Road					Other (specify) v
City		State	ZIP Code	Э	
Barrington Hills		IL	60010		Personal Funds of the Candidate
Original Amount of Loan	6000.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Period 6000.00
TERMS Date Incurred		E	Date Due	Interest Rate (If none, enter	
M M / D D / Y Y 09 20)12 Y	M M / D D	/ Y 12	V V V	00 % (apr) Yes X No
List All Endorsers or Guarante	ors (if any) t	o Loan Source	T		
1. Full Name (Last, First, Mido	lle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount Guaranteed	
City	State	ZIP Code			y
3. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
City	City State ZIP Code			Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middl	e Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This Pag				H	6000.00
Carry outstanding balance only to	D LINE 3, Sci	nedule D, for thi	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4145
Coolidge For Congress		
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Coolidge, Leslie, , ,		Primary General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State	ZIP Code
Barrington Hills	IL	60010 X Personal Funds of the Candida
Original Amount of Loan 18861.70	Cumulative Pa	ment To Date Balance Outstanding at Close of This Peri 0.00 18861.70
TERMS Date Incurred		ate Due Interest Rate Secured:
M M / D D / Y Y Y Y 03 / 13 / 2012	M M / D I	(If none, enter 0) / Y Y Y Y 12/31/12 0.00 % (apr) Yes X N
List All Endorsers or Guarantors (if an		
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Stat	e ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City Stat	e ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Stat	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Stat	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	nal)	18861.70
TOTALS This Period (last page in this line		line. If no Schedule D, carry forward to appropriate line of Summary

ago# 202101200000101201			Г		
CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a		
ME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.4147	
coolidge For Congress					
LOAN SOURCE Full Name (Last, First, Mic	dle Initial)		Memo Item		
Coolidge, Leslie, , ,				Primary K General	
Mailing Address 345 Old Sutton Road				Other (specify)	
City	State	ZIP Cod	e		
Barrington Hills	IL	60010		Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To E	Date Bala	ance Outstanding at Close of This Perio	
2661.28	3		0.00	2661.28	
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter		
M M / D D / Y Y Y Y 03 / 20 / 2012	M M / D D		2/31/12 0.	.00 % (apr) Yes 🗙 No	
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount Guaranteed		
City State	ZIP Code		Outstanding:	- y	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	g · · · g · · · · · ·	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line only				2661.28	

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4148
Coolidge For Congress		
LOAN SOURCE Full Name (Last, First	, Middle Initial)	Memo Item Election: 2012
Coolidge, Leslie, , ,		Primary X General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State	ZIP Code
Barrington Hills	IL	60010 X Personal Funds of the Candidat
Original Amount of Loan 1000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 1000.00
TERMS Date Incurred		Pate Due Interest Rate Secured:
M M / D D / Y Y Y Y 04 03 / 2012	M M / D	(If none, enter 0)
List All Endorsers or Guarantors (if an	ny) to Loan Source	
1. Full Name (Last, First, Middle Initial))	Name of Employer
Mailing Address		Occupation
City Stat	te ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City Stat	ziP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
City Stat	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	I	Name of Employer
Mailing Address		Occupation
City Stat	te ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optio	nal)	1000.00
TOTALS This Period (last page in this line		s line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Forr	n 3)			Use separate schedule for each category of th	PAGE 17 OF 24 FOR LINE NUMBER: (check only one)	
LUANS				Detailed Summary Pag		
NAME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4149	
Coolidge For Congress						
LOAN SOURCE Full Name (Las	st, First, Mi	ddle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					X General	
Mailing Address 345 Old Sutton Road					Other (specify) V	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidate	
Original Amount of Loan	652.64	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Period 1652.64	
TERMS Date Incurred		[Date Due	Interest Rate		
M 04 / D D / Y Y 26 / 201	Ý Ý Ý	M M / D D	/ Y 12	(If none, enter 1/31/12 0.0		
List All Endorsers or Guaranto		o Loan Source				
1. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount Guaranteed		
City	State	ZIP Code			y	
3. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:	7 7	
4. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · ·	
SUBTOTALS This Period This Page	e (optional).		·		1652.64	
TOTALS This Period (last page in t	his line onl	y)		······································	y y y y y y	
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this	s line. If no	o Schedule D, carry forw	ard to appropriate line of Summary.	

Use separate schedule(s) for each category of the Detailed Summary Page		
Transaction ID : SC/10.4136		
Memo Item Election: 2012		
Primary General		
Other (specify) ▼		
Personal Funds of the Candidate		
Balance Outstanding at Close of This Period 0.00 71.61		
Interest Rate Secured: (If none, enter 0)		
0.00 % (apr) Yes X No		
Name of Employer		
on		
red ling:		
Employer		
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Name of Employer		
on		
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Employer		
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ule D, carry forward to appropriate line of Summary.		

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CHEDULE C (FEC Form 3) DANS		Use separate scheo for each category o Detailed Summary F	of the (check only one)		
AME OF COMMITTEE (In Full)			Trans	saction ID : SC/10.4132	
Coolidge For Congress					
LOAN SOURCE Full Name (Last, First, M	iddle Initial)		Memo Ite	em Election: 2012	
Coolidge, Leslie, , ,				Primary X General	
Mailing Address 345 Old Sutton Road				Other (specify)	
City	State	ZIP Code)		
Barrington Hills	IL	60010		Personal Funds of the Cand	
Original Amount of Loan	Cumulative Pa	/ment To D	ate B	Balance Outstanding at Close of This F	
439.77			0.00	439.77	
TERMS Date Incurred	[ate Due	Interest R (If none, er		
10 ¹ / 19 ¹ / Y Y Y Y 10 ² 2012	M M / D D		/31/12 ^Y	0.00 % (apr) Yes 🗙	
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
City State	State ZIP Code			Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
City State	ZIP Code	(Amount Guaranteed Dutstanding:	· · · · · · · · · ·	
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
City State	ZIP Code	(Amount Guaranteed Dutstanding:		
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TOTALS This Period (last page in this line on	ly)		······ •		

CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	$\frac{1}{10}$ (check only one) X 13a
AME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4150
Coolidge For Congress					
LOAN SOURCE Full Name (Last, First	st, Mido	lle Initial)		Memo Item	Election: 2012
Coolidge, Leslie, , ,					Primary X General
Mailing Address 345 Old Sutton Road					Other (specify)
City		State	ZIP Code	e	
Barrington Hills		IL	60010		X Personal Funds of the Candidate
Original Amount of Loan 12000.00		Cumulative Pa	yment To E	Date Bala	nce Outstanding at Close of This Peric 12000.00
TERMS Date Incurred		Ē	Date Due	Interest Rate	
M M / D D / Y Y Y Y 10 19 / 2012	М	M / D D	/ Y 12	(If none, enter 2/31/12 0.0	
List All Endorsers or Guarantors (if a	any) to	Loan Source			
1. Full Name (Last, First, Middle Initia	al)			Name of Employer	
Mailing Address				Occupation	
City	ate	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7
2. Full Name (Last, First, Middle Initial	l)			Name of Employer	
Mailing Address				Occupation	
				Amount Guaranteed	
City St	tate	ZIP Code			y
3. Full Name (Last, First, Middle Initial	l)			Name of Employer	
Mailing Address				Occupation	
City St	tate	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial	l)			Name of Employer	
Mailing Address				Occupation	
City St	tate	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1
SUBTOTALS This Period This Page (opti	ional)			······	12000.00
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CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	$\frac{1}{10}$ (check only one) X 13a	
AME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4135
Coolidge For Congress				
LOAN SOURCE Full Name (Last, First, N	liddle Initial)		Memo Item	Election: 2012
Coolidge, Leslie, , ,				Primary X General
Mailing Address 345 Old Sutton Road				Other (specify)
City	State	ZIP Code	9	
Barrington Hills	IL	60010		X Personal Funds of the Candidate
Original Amount of Loan 32161.19	Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Peric 32161.19
TERMS Date Incurred		Date Due	Interest Rate	
10 / D D / Y Y Y Y 26 / 2012	M M / D C	D / Y 12	(If none, enter /31/12 0.0	
List All Endorsers or Guarantors (if any)	to Loan Source			
1. Full Name (Last, First, Middle Initial)		I	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
			Amount Guaranteed	
City State	ZIP Code			9 9 9 9 9 9 9
3. Full Name (Last, First, Middle Initial)		I	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This Page (optional	l)			, 32161.19
TOTALS This Period (last page in this line or Carry outstanding balance only to LINE 3, S				and to appropriate line of Summers

SCHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full)				Transact	tion ID : SC/10.4134	
Coolidge For Congress						
LOAN SOURCE Full Name (Las	st, First, Mi	ddle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					Primary X General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidate	
Original Amount of Loan	000.00	Cumulative Pa	yment To D	Date Balar 0.00	nce Outstanding at Close of This Period 6000.00	
TERMS Date Incurred		Ľ	Date Due	Interest Rate		
M M / D D / Y Y 11 02 / Z01	^Y Y 2	M M / D D	/ Y 12	(If none, enter //31/12 0.0		
List All Endorsers or Guaranto	rs (if any) t	to Loan Source				
1. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address	Mailing Address			Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	η · · · η · · · · · ·	
2. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7	
SUBTOTALS This Period This Page TOTALS This Period (last page in t					6000.00	
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this	s line. If n	o Schedule D, carry forw	vard to appropriate line of Summary.	

CHEDULE C (FEC) DANS	Form 3)		Use separate schedule for each category of th Detailed Summary Pag	(check only one)		
AME OF COMMITTEE (In Ful	l)				tion ID : SC/10.4130	
Coolidge For Congress	7					
LOAN SOURCE Full Name	e (Last, First, Mic	Idle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					Primary X General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidate	
Original Amount of Loan	1780.84	Cumulative Pa	yment To D	Date Bala 0.00	nce Outstanding at Close of This Peric 1780.84	
TERMS Date Incurre	d	[Date Due	Interest Rate		
M M / D D / Y	^Y 2012 ^Y	M M / D D	/ Y 12	(If none, enter //31/12 0.0	· · · · · · · · · · · · · · · · · · ·	
List All Endorsers or Gua	· • • •	o Loan Source				
1. Full Name (Last, First, I	1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	ay 1 1 ay 1 1 ay 1	
2. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount Guaranteed		
City	State	ZIP Code			y y	
3. Full Name (Last, First, N	liddle Initial)	•		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1	
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TOTALS This Period (last pag	e in this line only)				
Carry outstanding balance on	nly to LINE 3, Sch	edule D, for thi	s line. If no	o Schedule D, carry forw	ard to appropriate line of Summary.	

HEDULE C (FEC F ANS	Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full))			Transac	tion ID : SC/10.4164	
oolidge For Congress						
LOAN SOURCE Full Name	e (Last, First, Mid	dle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie, , ,					Primary X General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City		State	ZIP Code	e		
Barrington Hills		IL	60010		X Personal Funds of the Candidat	
Original Amount of Loan	30.00	Cumulative Pa	ayment To D	Date Bala	nce Outstanding at Close of This Perio	
TERMS Date Incurred	b		Date Due	Interest Rate		
M M / D D / Y	2012 Y	/ M / D I	/ Y 12	(If none, enter /31/12 0.0	· · · · · · · · · · · · · · · · · · ·	
List All Endorsers or Guar		Loan Source				
1. Full Name (Last, First, N	Aiddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	ay 1 1 ay 1 1 ay 1	
2. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
		1		Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1	
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