

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

Nancy Jacobs for Congress

ADDRESS (number and street)

139 N Main St., 201

Check if different than previously reported. (ACC)

Bel Air

MD

21014

2. **FEC IDENTIFICATION NUMBER ▼**

C C00509216

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MD

02

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

(a) Quarterly Reports:

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

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Lesley Lookingbill

Signature of Treasurer Lesley Lookingbill

**[Electronically Filed]**

Date

/  /

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Nancy Jacobs for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 29 / 2011 To: M M / D D / Y Y Y Y 03 / 14 / 2012

	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))....	58815.00	58815.00
(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)).....	58815.00	58815.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	20525.56	20525.56
(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)).....	20525.56	20525.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	35633.94	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**Nancy Jacobs for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	49925.00	49925.00
(ii) Unitemized.....	5901.00	5901.00
(iii) TOTAL of contributions from individuals ▶	55826.00	55826.00
(b) Political Party Committees.....	2989.00	2989.00
(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))..	58815.00	58815.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	67.00	67.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	58882.00	58882.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20525.56	20525.56
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 .....	2722.50	2722.50
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	23248.06	23248.06

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58882.00
25. SUBTOTAL (add Line 23 and Line 24).....	58882.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23248.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	35633.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 25
	<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	

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

NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia Beaty**

Mailing Address 529 Trimble Rd

City Joppa State MD Zip Code 21085

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : SA11AI.4379**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Beaty**

Mailing Address 529 Trimble Rd

City Joppa State MD Zip Code 21085

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : SA11AI.4381**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Clark D Connellee**

Mailing Address 3205 Cool Branch Rd

City Churchville State MD Zip Code 21028

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

Name of Employer Pepsi Bottling Group Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 09 / 2012

**Transaction ID : SA11AI.4139**

Amount of Each Receipt this Period  
 2500.00

**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 6 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerrilea Connellee**

Mailing Address 3205 Cool Branch Rd

City Churchville State MD Zip Code 21028

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

Name of Employer PepsiCo of Havre de Grace Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2012

**Transaction ID : SA11AI.4226**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Cook**

Mailing Address 1901 Van Bibber Rd

City Edgewood State MD Zip Code 21040

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

Name of Employer Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2012

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Dorsey**

Mailing Address 10631 Pot Spring Rd

City Cockeysville State MD Zip Code 21030

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

Name of Employer self-employed Occupation Real estate developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2012

**Transaction ID : SA11AI.4359**

Amount of Each Receipt this Period  
2500.00

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

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

5300.00

**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 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Lee Lee Gaines Jr.**

Mailing Address 6 Bowen Mill Rd

City Baltimore State MD Zip Code 21212

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

Name of Employer self-employed Occupation Utility Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2012

**Transaction ID : SA11AI.4393**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Gilbert II**

Mailing Address 1475 Wynodham Dr South

City York State PA Zip Code 17403

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

Name of Employer self-employed Occupation Real Estate Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2012

**Transaction ID : SA11AI.4187**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Karen Gilbert**

Mailing Address 1475 Wynodham Dr South

City York State PA Zip Code 17403

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

Name of Employer Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2012

**Transaction ID : SA11AI.4241**

Amount of Each Receipt this Period  
 2500.00

**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 8 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. William Harloe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2012	
Mailing Address 304 Vale Rd		<b>Transaction ID : SA11AI.4391</b>	
City State Zip Code Bel Air MD 21014	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation self-employed Restaurant owner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Janet Henderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012	
Mailing Address PO Box 268		<b>Transaction ID : SA11AI.4219</b>	
City State Zip Code Jarrettsville MD 21084	Amount of Each Receipt this Period _____ 2500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Janet Henderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012	
Mailing Address PO Box 268		<b>Transaction ID : SA11AI.4221</b>	
City State Zip Code Jarrettsville MD 21084	Amount of Each Receipt this Period _____ 2500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 5500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Jo Henderson**

Mailing Address 2621 Bailey Dr

City Forest Hill State MD Zip Code 21050

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

Name of Employer Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 16 / 2012

**Transaction ID : SA11AI.4286**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Henderson**

Mailing Address PO Box 268

City Jarrettsville State MD Zip Code 21084

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

Name of Employer Occupation CEO

Nutramax

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.4341**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Henderson**

Mailing Address PO Box 268

City Jarrettsville State MD Zip Code 21084

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

Name of Employer Occupation CEO

Nutramax

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 24 / 2012

**Transaction ID : SA11AI.4343**

Amount of Each Receipt this Period  
 5000.00

**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 10 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Troy Henderson**

Mailing Address 2621 Bailey Rd

City Forest Hill State MD Zip Code 21050

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

Name of Employer Nutramax Laboratories Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 16 / 2012

**Transaction ID : SA11AI.4375**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Hug**

Mailing Address 1997 Annapolis Exchange Pkwy Ste 300

City Annapolis State MD Zip Code 21401

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 23 / 2012

**Transaction ID : SA11AI.4321**

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
**Howard S Klein**

Mailing Address 13608 Jarrettsville Pike

City Phoenix State MD Zip Code 21131

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

Name of Employer self-employed Occupation Grocery store chain owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 12 / 2012

**Transaction ID : SA11AI.4207**

Amount of Each Receipt this Period  
1000.00

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

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

4200.00

**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 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martin Madden**

Mailing Address 8951 Edmonston Rd

City State Zip Code  
Greenbelt MD 20770

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

Name of Employer self-employed Occupation Insurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 19 / 2012

**Transaction ID : SA11AI.4274**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Meoli**

Mailing Address 752 Winterfield Ct

City State Zip Code  
Bel Air MD 21015

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

Name of Employer self-employed Occupation Restaurant owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : SA11AI.4107**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Virginia Meoli**

Mailing Address 752 Winterfield Ct

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 28 / 2011

**Transaction ID : SA11AI.4377**

Amount of Each Receipt this Period  
1500.00

**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 12 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robb Merritt**

Mailing Address 6408 Pratt Ave

City Baltimore State MD Zip Code 21212

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

Name of Employer self-employed Occupation Real estate developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2012

**Transaction ID : SA11AI.4327**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Barton S Mitchell**

Mailing Address PO Box 1247

City Brooklandville State MD Zip Code 21022

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2012

**Transaction ID : SA11AI.4115**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Peroutka**

Mailing Address 8028 Ritchie Hwy Suite 300

City Pasadena State MD Zip Code 21122

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

Name of Employer self-employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 02 / 2012

**Transaction ID : SA11AI.4367**

Amount of Each Receipt this Period  
 1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jayne Plank**

Mailing Address 100005 Frederick Ave

City Kensington State MD Zip Code 20895

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

Name of Employer Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2012

**Transaction ID : SA11AI.4224**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Edward Reilly**

Mailing Address 2200 Defense Hwy  
407

City Crofton State MD Zip Code 21114

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

Name of Employer Occupation self-employed Insurance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2011

**Transaction ID : SA11AI.4171**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Henry A Rosenberg**

Mailing Address One North Charles St, 22nd Fl

City Baltimore State MD Zip Code 21201

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

Name of Employer Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2012

**Transaction ID : SA11AI.4200**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Spedden**

Mailing Address 1002 S. Schumaker Dr

City Salisbury State MD Zip Code 21804

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2012

**Transaction ID : SA11AI.4355**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Ralph Walls**

Mailing Address 207 Hood Ct

City Churchville State MD Zip Code 21028

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

Name of Employer retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2012

**Transaction ID : SA11AI.4317**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Ward**

Mailing Address 2700 Philadelphia Rd

City Edgewood State MD Zip Code 21040

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

Name of Employer self-employed Occupation Home builder

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2012

**Transaction ID : SA11AI.4344**

Amount of Each Receipt this Period  
 2500.00

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

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

3100.00

**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 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Waters**

Mailing Address 3820 Manor Glen Rd

City State Zip Code  
Baldwin MD 21013

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

Name of Employer Occupation  
reired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2011

**Transaction ID : SA11AI.4397**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**William Waters**

Mailing Address 3820 Manor Glen Rd

City State Zip Code  
Baldwin MD 21013

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

Name of Employer Occupation  
reired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : SA11AI.4399**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**David Williams Jr.**

Mailing Address 3098 Augustine Herman Hwy

City State Zip Code  
Chesapeake City MD 21915

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

Name of Employer Occupation  
self-employed Auto dealership owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2012

**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
250.00

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

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

1075.00

**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 25
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerard Wittstadt Jr.**

Mailing Address 511 Ricketts Mill Rd

City: Elkton State: MD Zip Code: 21921

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

Name of Employer: self-employed Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 05 / 2011

**Transaction ID : SA11AI.4191**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Joan Wood**

Mailing Address 2 Old Maple Ct

City: Essex State: MD Zip Code: 21221

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

Name of Employer: retired Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 12 / 2012

**Transaction ID : SA11AI.4228**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Carl Wright**

Mailing Address 12920 Marsh Landing

City: Palm Beach State: FL Zip Code: 33418

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

Name of Employer: retired Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 02 / 28 / 2012

**Transaction ID : SA11AI.4125**

Amount of Each Receipt this Period: 500.00

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

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

1500.00

49925.00



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

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

FOR LINE NUMBER: PAGE 17 OF 25  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andy Harris for Congress**

Mailing Address **PO Box 1627**

City **Annapolis** State **MD** Zip Code **21404**

FEC ID number of contributing federal political committee. **C C00435974**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 11 / 2012**

**Transaction ID : SA11B.4406**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Barry Glassman**

Mailing Address **PO Box 273**

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

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 12 / 2012**

**Transaction ID : SA11B.4408**

Amount of Each Receipt this Period  
 999.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Kathy Szeliga**

Mailing Address **PO Box 40**

City **Kingsville** State **MD** Zip Code **21087**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2012**

**Transaction ID : SA11B.4410**

Amount of Each Receipt this Period  
 990.00

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

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

2989.00

2989.00

**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 18 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Britestar Business Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 1924.27
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 003	<b>Transaction ID : SB17.4424</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Britestar Business Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 852.03
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 004	<b>Transaction ID : SB17.4442</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Britestar Business Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 253.10
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 006	<b>Transaction ID : SB17.4452</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3029.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enktesis LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2012
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : SB17.4419</b>
City Forest Hill	State MD	
Zip Code 21050	Purpose of Disbursement Campaign Management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Enktesis LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 1448.72 <b>Transaction ID : SB17.4423</b>
City Forest Hill	State MD	
Zip Code 21050	Purpose of Disbursement Campaign mgmt & office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lisa Fitzhugh</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4435</b>
City Monkton	State MD	
Zip Code 21111	Purpose of Disbursement Campaign manager	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5848.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lisa Fitzhugh</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 108.86 <b>Transaction ID : SB17.4444</b>
City Monkton	State MD	
Zip Code 21111	Purpose of Disbursement reimbursement - cell phone for campaign	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lisa Fitzhugh</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.4445</b>
City Monkton	State MD	
Zip Code 21111	Purpose of Disbursement Campaign manager	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Indy's Services</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address PO Box 26		Amount of Each Disbursement this Period 1887.50 <b>Transaction ID : SB17.4437</b>
City Perry Hall	State MD	
Zip Code 21128	Purpose of Disbursement Social Media Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4996.36
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 25		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maryland Republican Party</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4427</b>
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement Deposit on campaign software per contract	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Maryland Republican Party</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4441</b>
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement Software payment on contract	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Maryland Republican Party</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.4443</b>
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement monthly rent for software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 25			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maryland Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2012</b>
Mailing Address <b>95 Cathedral St</b>		Amount of Each Disbursement this Period <b>400.00</b>
City <b>Annapolis</b> State <b>MD</b> Zip Code <b>21401</b>	Purpose of Disbursement <b>monthly lease for software</b>	<b>001</b> Category/ Type
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<b>Transaction ID : SB17.4451</b>

Full Name (Last, First, Middle Initial) <b>B. Merritt Properties LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2012</b>
Mailing Address <b>2066 Lord Baltimore Dr</b>		Amount of Each Disbursement this Period <b>600.00</b>
City <b>Baltimore</b> State <b>MD</b> Zip Code <b>21244</b>	Purpose of Disbursement <b>office rental</b>	<b>001</b> Category/ Type
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<b>Transaction ID : SB17.4439</b>

Full Name (Last, First, Middle Initial) <b>c. Joe Sliwka</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 17 / 2012</b>
Mailing Address <b>2320 Aquilas Delight</b>		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>Fallston</b> State <b>MD</b> Zip Code <b>21047</b>	Purpose of Disbursement <b>Volunteer director</b>	<b>001</b> Category/ Type
Candidate Name	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<b>Transaction ID : SB17.4429</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joe Sliwka</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 2320 Aquilas Delight		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4446</b>
City Fallston	State MD	
Zip Code 21047	Purpose of Disbursement Volunteer director	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Weyrich Cronin &amp; Sorra</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 139 N Main St Ste 201		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.4421</b>
City Bel Air	State MD	
Zip Code 21014	Purpose of Disbursement Treasurer/Accounting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	19674.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 25			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enktesis LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 975.47 <b>Transaction ID : SB21.4475</b>
City Forest Hill	State MD	
Zip Code 21050	Purpose of Disbursement planning announcement & other campaign mgmt	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 34.19 <b>Transaction ID : SB21.4472</b>
City Omaha	State NE	
Zip Code 68145	Purpose of Disbursement paypal fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Suzanne Stoltenberg</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 10522 High Rock Rd		Amount of Each Disbursement this Period 231.25 <b>Transaction ID : SB21.4473</b>
City Airville	State PA	
Zip Code 17302	Purpose of Disbursement reimbursements for testing the waters research	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1240.91
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 25	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nancy Jacobs for Congress**

Full Name (Last, First, Middle Initial) <b>A. Videography by Brent Myers</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 05 / 2012</b>
Mailing Address <b>8220 Maple Cliffe Way</b>		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : SB21.4478</b>
City <b>Ellicott City</b> State <b>MD</b> Zip Code <b>21043</b>	Purpose of Disbursement videotaping <b>004</b> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2440.91</b>