

# 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

DOLD FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 6312

Check if different than previously reported. (ACC)

Libertyville

IL

60048

2. **FEC IDENTIFICATION NUMBER** ▼

C C00465971

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IL

10

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 Paul Kilgore

Signature of Treasurer Paul Kilgore

[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

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**DOLD 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))....	463820.94	2284532.88
(b) Total Contribution Refunds (from Line 20(d)) .....	4000.00	23025.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	459820.94	2261507.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	225007.66	1025016.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7252.47
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	225007.66	1017764.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1486508.29	
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).....	138701.70	

**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

**DOLD 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).....	241294.00	1191824.00
(ii) Unitemized.....	9755.18	52068.24
(iii) TOTAL of contributions from individuals ▶	251049.18	1243892.24
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	212771.76	1040640.64
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	463820.94	2284532.88
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	77459.46
<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	7252.47
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	6.31	38.34
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	463827.25	2369283.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	225007.66	1025016.55
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 .....	4000.00	20025.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	4000.00	23025.00
21. OTHER DISBURSEMENTS .....	0.00	6125.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	229007.66	1054166.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1251688.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	463827.25
25. SUBTOTAL (add Line 23 and Line 24).....	1715515.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	229007.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1486508.29

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Randy Fifield**

Mailing Address 600 W Jackson Blvd  
Ste 600

City Chicago State IL Zip Code 60661-5677

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

Name of Employer FRC Realty Occupation Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : A850DE98AC40F4F1BAE6**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard L. Thomas**

Mailing Address 82 Indian Hill Rd

City Winnetka State IL Zip Code 60093-3935

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : ABBBE70487F7F41CD9D5**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence Linden**

Mailing Address 41 Riverside Dr

City New York State NY Zip Code 10024-6803

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : AFF612434987F4BBE8D0**

Amount of Each Receipt this Period  
2700.00

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

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

5700.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Ross**

Mailing Address 141 Robsart Pl

City Kenilworth State IL Zip Code 60043-1263

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

Name of Employer Tech Source 360 Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A6F736CFE5C80451A938**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dietrich M. Gross**

Mailing Address 769 Michigan Ave

City Wilmette State IL Zip Code 60091-1956

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

Name of Employer Jupiter Oxygen Corp. Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015

**Transaction ID : A3B13A9168C3C4ADE871**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kimberly Parker**

Mailing Address 8046 Ashford Blvd

City Laurel State MD Zip Code 20707-5877

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

Name of Employer Gray Global Advisers Occupation Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A49B324B0C07B4560836**

Amount of Each Receipt this Period  
 250.00

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

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

3750.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth Blair Nagel**

Mailing Address 246 W Laurel Ave

City State Zip Code  
Lake Forest IL 60045-1120

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

Name of Employer Occupation  
Metro Storage Llc CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : A8016218C8E6B4647838**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James B. Gottlieb**

Mailing Address 528 Clavey Ln

City State Zip Code  
Highland Park IL 60035-4533

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

Name of Employer Occupation  
Chuhak and Tecson, P.C. Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2015

**Transaction ID : A0B199658E226416A98C**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James Wildman**

Mailing Address 927 Cherokee Rd

City State Zip Code  
Lake Forest IL 60045-3958

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

Name of Employer Occupation  
William Blair and Company Investment Banking

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2015

**Transaction ID : AE0770BF668354EDCBC9**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 8 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Judith L. Frank-Gonwa**

Mailing Address 14332 Towne Trl

City State Zip Code  
Libertyville IL 60048-4832

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**470.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : AF24B28006932489FA16**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Forrest Whittaker**

Mailing Address 1072 Aynsley Avenue  
Suite 208

City State Zip Code  
Lake Forest IL 60045-1517

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

Name of Employer Occupation  
Avalign Technologies Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**480.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : A24288EF38F8C479B8E7**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William W. Lane**

Mailing Address 1001 Bay Rd  
Apt 203A

City State Zip Code  
Vero Beach FL 32963-3069

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : AB0BC3ACBC8A44EC5929**

Amount of Each Receipt this Period  
**500.00**

**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: PAGE 9 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Teplitzky**

Mailing Address 1033 Wade Street

City Highland Park State IL Zip Code 60035-4153

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

Name of Employer Wynnchurch Capital Ltd. Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : AA9AA254161494983A95**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**James Meltsner**

Mailing Address 1808 LaMont St NW

City Washington State DC Zip Code 20010-2604

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A508D009F1F234D25A30**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Adams**

Mailing Address XMS Capital Partners  
321 North Clark Street

City Chicago State IL Zip Code 60654-4714

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

Name of Employer XMS Capital Partners Occupation Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A59AB2AB425D04674B05**

Amount of Each Receipt this Period  
 1350.00

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

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

4300.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara A. Rinella**

Mailing Address 321 Cumberland Ave.

City State Zip Code  
Kenilworth IL 60043-1171

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

Name of Employer Occupation  
Self Employed Book Reviewer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A358CF7E32A09415684A**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Raymond McGrath**

Mailing Address 1714 Esquire Lmn

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : ABEA296F1B4534CC2B71**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**William Richey**

Mailing Address PO Box 8

City State Zip Code  
Lake Mills WI 53551-0008

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

Name of Employer Occupation  
AKT Business Services Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A0BE55703FB33471996D**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1550.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert A. Warman**

Mailing Address 1445 N. State Pky Apt. 1405  
Apt 1405

City Chicago State IL Zip Code 60610-1584

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A148F34EF8A7D4E4FAE7**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Willcox**

Mailing Address 9325 Reushaw Dr.

City Bethesda State MD Zip Code 20817-2227

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

Name of Employer Capitol Tax Partners Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : A82F9D2520C954F20A8E**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Sherlock**

Mailing Address 7109 Penguin Pl

City Falls Church State VA Zip Code 22043-1504

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A72B4649C54704BFA850**

Amount of Each Receipt this Period  
500.00

**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: PAGE 12 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lesley Stillman**

Mailing Address 1207 Hohlfelder Rd

City State Zip Code  
Glencoe IL 60022-1020

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : A17B0CF43EBE342DEBC0**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Luke Praxmarer**

Mailing Address 1306 Borders Drive

City State Zip Code  
Palatine IL 60067-6606

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

Name of Employer Occupation Information Requested  
Corkill Insurance Insurance Agent

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : A162445B4444544D2A22**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Sam Brilliant**

Mailing Address 1201 Melody Rd

City State Zip Code  
Lake Forest IL 60045-1500

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

Name of Employer Occupation Information Requested  
None Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : A1643107FC7DB4999826**

Amount of Each Receipt this Period  
100.00

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

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

2950.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Shapiro**

Mailing Address 71 Red Oak Ln

City Highland Park State IL Zip Code 60035-4224

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

Name of Employer Emlin Cosmetics Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : A33C275BAA2624F7794C**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dmitry Farbman**

Mailing Address 3461 Cornflower Trl

City Northbrook State IL Zip Code 60062-6341

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

Name of Employer Ubs Occupation Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AB4B83CAE50CB4348B9C**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter Walker**

Mailing Address 7231 North Highfield Lane

City Birmingham State AL Zip Code 35242-7244

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

Name of Employer Walker International Enterprises Inc Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 01 / 2015

**Transaction ID : AD6689945464040F882D**

Amount of Each Receipt this Period  
 1000.00

**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: PAGE 14 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kelley A. Bergstrom**

Mailing Address 714 Roger Ave

City Kenilworth State IL Zip Code 60043-1046

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

Name of Employer Bergstrom Invest Mgt. Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : A0ADBA21FE1B34AC7AD3**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 31 W Kirke St

City Chevy Chase State MD Zip Code 20815-4260

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A4B547EC53D604D2CA2A**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Thomas**

Mailing Address 1424 Richland Wood Ln

City Brentwood State TN Zip Code 37027-4136

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : A5CA1FEC83A9641EC85D**

Amount of Each Receipt this Period  
 2000.00

**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: PAGE 15 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cameron Avery**

Mailing Address 278 Mary St

City State Zip Code  
Winnetka IL 60093-1522

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : AA545876E011B4647973**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lee Graber**

Mailing Address 21350 W Lakeview Pkwy

City State Zip Code  
Mundelein IL 60060-9603

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

Name of Employer Occupation  
Self Employed Orthodontist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A4A063E0B1290434392F**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joel Dalkin**

Mailing Address 245 Franklin Rd

City State Zip Code  
Glencoe IL 60022-1213

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : AD9E7F37F0D394E6B9F8**

Amount of Each Receipt this Period  
 700.00

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

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

1950.00

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

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

FOR LINE NUMBER: PAGE 16 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Nathaniel Stillman**

Mailing Address 1207 Hohlfelder Rd

City State Zip Code  
Glencoe IL 60022-1020

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : A96B249B5242247BA936**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael J. Revord**

Mailing Address 350 Willow Road

City State Zip Code  
Winnetka IL 60093-4130

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

Name of Employer Occupation Information Requested  
Aldine Capital Partners Private Equity Professional

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AD8546E9A7A594ABBB35**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David J. Bentrem**

Mailing Address 1228 W Oakdale Ave

City State Zip Code  
Chicago IL 60657-4222

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

Name of Employer Occupation Information Requested  
Northwestern Hospital Surgeon

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2015

**Transaction ID : A4237CC3BE86740DEA56**

Amount of Each Receipt this Period  
500.00

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

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

5900.00



**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 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Stephanie Sick**

Mailing Address 565 Sheridan Rd

City Winnetka State IL Zip Code 60093-2344

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

Name of Employer None Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : A30752332AF2145E086D**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Segal**

Mailing Address 34 Lakewood Dr

City Glencoe State IL Zip Code 60022-1327

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : A92BFEB1F63A64B56BAE**

Amount of Each Receipt this Period  
 1700.00

**C.** Full Name (Last, First, Middle Initial)  
**Lesley Stillman**

Mailing Address 1207 Hohlfelder Rd

City Glencoe State IL Zip Code 60022-1020

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : A0FD177216B014DE7A89**

Amount of Each Receipt this Period  
 2700.00

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

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

7100.00

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

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

FOR LINE NUMBER: PAGE 18 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen R. Wilson**

Mailing Address 2448 Central Park Ave

City State Zip Code  
Evanston IL 60201-1812

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

Name of Employer Occupation  
CF Industries Holdings, Inc. Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AFC25A31968DF430095B**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Elizabeth Maier**

Mailing Address 233 South Lee Street

City State Zip Code  
Alexandria VA 22314-3307

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : AD6BD9066D55740569AB**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kirsten Chadwick**

Mailing Address 601 President Ford Ln

City State Zip Code  
Alexandria VA 22302-3033

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

Name of Employer Occupation  
Fierce Government Relations Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A3D7FCECCD9784ACD802**

Amount of Each Receipt this Period  
500.00

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

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

3450.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jay Berman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 207 Leonard Wood N		<b>Transaction ID : A068856F786DF4EF78B1</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Time and Space Media	Occupation Media Buying	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John F. Podjasek III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2015
Mailing Address 93 Robsart Rd		<b>Transaction ID : A83D6763D2C8C4467984</b>
City Kenilworth	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Northern Trust	Occupation Banker	
Receipt For: 2016 <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>C. George Cooper</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2015
Mailing Address 139 Grafton St		<b>Transaction ID : AC215C854427941DE9B3</b>
City Chevy Chase	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Forbes Tate	Occupation Principal	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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: PAGE 20 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sylvie M. Legere**

Mailing Address 510 Laurel Ave

City State Zip Code  
Wilmette IL 60091-2812

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

Name of Employer Occupation  
Foov Fitness Co-Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 24 / 2015

**Transaction ID : AC4FBB8774F63461C802**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Lyman**

Mailing Address 240 Melrose Ave

City State Zip Code  
Kenilworth IL 60043-1152

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A4B50FEAFEC94615ADC**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Gregory Nickerson**

Mailing Address 11215 Marwood Hill Dr

City State Zip Code  
Potomac MD 20854-1241

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AE6D88F34895B40A39C9**

Amount of Each Receipt this Period  
1000.00

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

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

3800.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Justin Shiffman**

Mailing Address 630 North State Street #1906

City Chicago State IL Zip Code 60654-5554

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

Name of Employer NextTier Education Occupation Ceo

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : AD0C968DE5A7A429AA8F**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Vernon Loucks Jr.**

Mailing Address 1101 Skokie Blvd Ste 240

City Northbrook State IL Zip Code 60062-4125

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : A5182F393EE9C4BDD9DF**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Col Gilman L. Clark Usa (Ret)**

Mailing Address 735 S Green Bay Rd

City Lake Forest State IL Zip Code 60045-3070

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A4E8DFA9E7DA04087916**

Amount of Each Receipt this Period  
 100.00

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

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

1600.00

**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 203
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Amy George</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2015
Mailing Address 1350 W Grand Ave		<b>Transaction ID : AFCA8E076C3144D639E1</b>
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Self Employed	Occupation Photographer	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>B. Martha Litas</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2015
Mailing Address 607 Pauline Ave		<b>Transaction ID : AE82BA94B972A42E1A34</b>
City Buffalo Grove	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Carrie Byrne</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2015
Mailing Address 80 Annandale Rd.		<b>Transaction ID : ADE70D4B5503D4AA3984</b>
City Chappaqua	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Homemaker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4700.00
<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 23 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Sandra E. Dalkin**

Mailing Address 245 Franklin Rd

City State Zip Code  
Glencoe IL 60022-1213

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A399117B24D8848048A5**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Morrie Much**

Mailing Address 191 N Wacker Dr. Ste 1800  
Ste 1800

City State Zip Code  
Chicago IL 60606-1631

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

Name of Employer Occupation  
Much Shelist Freed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A97EE93B2E374465A926**

Amount of Each Receipt this Period  
200.00

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

Mailing Address P. O. Box 1423

City State Zip Code  
Boca Grande FL 33921-1423

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A366877F3B79E440697B**

Amount of Each Receipt this Period  
2600.00

**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 24 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Matthew L. Smarjesse**

Mailing Address 405 E. Vanderkarr Road

City State Zip Code  
Saint Anne IL 60964-5387

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

Name of Employer Occupation  
Exelon Nuclear Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 08 / 2015

**Transaction ID : AEBAC2C0467C24AFAB67**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Vicki Apatoff**

Mailing Address 730 Ardsley Rd

City State Zip Code  
Winnetka IL 60093-2004

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2015

**Transaction ID : A6585EDF8DF544FD7A44**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jason Van Pelt**

Mailing Address 6218 Split Creek Lane

City State Zip Code  
Alexandria VA 22312-3905

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

Name of Employer Occupation  
Novartis Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 05 / 2015

**Transaction ID : A24D65DF3E2384BAA94C**

Amount of Each Receipt this Period  
500.00

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

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

1250.00



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

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

FOR LINE NUMBER: PAGE 25 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Hirschmann**

Mailing Address 4052 Seminary Rd

City State Zip Code  
Alexandria VA 22304-1646

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

Name of Employer Occupation  
Williams & Jensen, Pllc Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : A4CBFE8C69BCD4A67B35**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nathaniel Stillman**

Mailing Address 1207 Hohlfelder Rd

City State Zip Code  
Glencoe IL 60022-1020

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : ACDFC9A46747B4115BEA**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John J. Anton**

Mailing Address 522 Kenilworth Ave

City State Zip Code  
Kenilworth IL 60043-1026

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

Name of Employer Occupation  
Valspar Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : A8F9BB8BBF34544C6A70**

Amount of Each Receipt this Period  
500.00

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

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

3700.00

**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 26 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Borodawka**

Mailing Address 1500 S Dairy Ashford Rd, Suite 240

City Houston	State TX	Zip Code 77077-3861
-----------------	-------------	------------------------

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

Name of Employer Hiretech	Occupation Government Relations Director
------------------------------	---

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2015

**Transaction ID : A7020F86838B845DEBFC**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Cinthia L. Lillard**

Mailing Address 100 Church Rd

City Winnetka	State IL	Zip Code 60093-3904
------------------	-------------	------------------------

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

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : AF6526BCFAEB24A359DC**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Rebecca Nagel**

Mailing Address 246 W Laurel Ave

City Lake Forest	State IL	Zip Code 60045-1120
---------------------	-------------	------------------------

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

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : A90CF58DE5E794610B63**

Amount of Each Receipt this Period  
2700.00

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

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

5200.00

**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 27 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George Pattee**

Mailing Address 1563 Hubbard

City State Zip Code  
Batavia IL 60510-1419

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

Name of Employer Occupation  
Parksite Ceo

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : AF6771404CDBB4390AFA**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dean Manone**

Mailing Address 1650 Sunnyside Ave

City State Zip Code  
Highland Park IL 60035-2155

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

Name of Employer Occupation  
Red Star Outdoor Advertising

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : ACF6EC9DB089D4BDA86D**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Renee Thaler**

Mailing Address 11653 E Aster Dr

City State Zip Code  
Scottsdale AZ 85259-2753

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

Name of Employer Occupation  
Transworld Exhibits, Inc. Trade Show Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : A8B39B015ABCF4993863**

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 28 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Matthew L. Smarjesse**

Mailing Address 405 E. Vanderkarr Road

City State Zip Code  
Saint Anne IL 60964-5387

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

Name of Employer Occupation  
Exelon Nuclear Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2015

**Transaction ID : AED91F68E4CEA4EEBB42**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 222 W Washington Ave

City State Zip Code  
Lake Bluff IL 60044-2036

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

Name of Employer Occupation  
Nixon Peabody LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : A8D00F087971D494BB25**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Wayne M. Goldstein**

Mailing Address 2887 Lexington Ln

City State Zip Code  
Highland Park IL 60035-1025

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

Name of Employer Occupation  
II Bone and Joint Insitute Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : A39086EA453A24B3282D**

Amount of Each Receipt this Period  
**500.00**

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 29 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Joanne Plummer**

Mailing Address 1040 N Lake Shore Dr

City Chicago State IL Zip Code 60611-1165

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A43B984EE1EDA4803B6D**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Madigan**

Mailing Address 353 Melrose Ave.

City Kenilworth State IL Zip Code 60043-1153

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

Name of Employer Hilco Retail Consulting Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : AC9EF174850FD477D9F7**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Hatherly**

Mailing Address 65 Hillburn Ln

City North Barrington State IL Zip Code 60010-6925

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

Name of Employer Wynnchurch Capital Ltd. Occupation Venture Capitalist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A9C4561F5E6DA40DC8CE**

Amount of Each Receipt this Period  
 2700.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 30 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Regina Brun**

Mailing Address 31048 Prairie Ridge Rd

City State Zip Code  
Libertyville IL 60048-4898

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

Name of Employer Occupation  
Abbvie R and D Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : AB9D13CF040784815A0E**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 726 Greenwood Ave

City State Zip Code  
Wilmette IL 60091-1748

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : AC603C3A131C741C4B97**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Stephen C. Romanoff**

Mailing Address 207 E North Ave

City State Zip Code  
Lake Bluff IL 60044-2135

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A7FE7D6EBCC96443B95D**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 203  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert P. Knight**

Mailing Address 990 Kirkhill Lane

City State Zip Code  
Lake Forest IL 60045-4207

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 29 2015

**Transaction ID : A5CE5910412B6434BA14**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Rosenberg**

Mailing Address 1717 Spruce

City State Zip Code  
Highland Park IL 60035-2148

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

Name of Employer Occupation  
Sterling Venture Partners Venture Capitalist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 31 2015

**Transaction ID : A72CA8AADD98F4E549AD**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Marvin W. Ehlers**

Mailing Address 1650 Tall Tree Lane

City State Zip Code  
Deerfield IL 60015-2067

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
975.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 31 2015

**Transaction ID : ABA2EDF1AC6E3440D853**

Amount of Each Receipt this Period  
75.00

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

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

1825.00

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

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

FOR LINE NUMBER: PAGE 32 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Gutmann**

Mailing Address 684 Thorngate Ln

City State Zip Code  
Riverwoods IL 60015-3899

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

Name of Employer Occupation  
Stategic Management Advisors Investment Advisor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : AC27651E4C2A447D4B99**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kirsten Chadwick**

Mailing Address 601 President Ford Ln

City State Zip Code  
Alexandria VA 22302-3033

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

Name of Employer Occupation  
Fierce Government Relations Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : A44F3AB9D8C5146D4B45**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Casey Pristou**

Mailing Address 390 Belle Foret Dr

City State Zip Code  
Lake Bluff IL 60044-1239

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

Name of Employer Occupation  
Watershed Development Corp President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : AE5C4AAC2096D4E6B922**

Amount of Each Receipt this Period  
1000.00

**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 33 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Evan Migdail**

Mailing Address 7219 Delfield St

City State Zip Code  
Chevy Chase MD 20815-4045

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : A4DC7E751CADB4C3393E**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John A. Edwardson**

Mailing Address P. O. Box 1423

City State Zip Code  
Boca Grande FL 33921-1423

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

Name of Employer Occupation Information Requested  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : AC17D23D16D2743929A1**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jason Pavluchuk**

Mailing Address 14317 Meaghan Loop

City State Zip Code  
Gainesville VA 20155-5947

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

Name of Employer Occupation Information Requested  
Pavluchuk and Associates President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2015

**Transaction ID : A3B87AD05FD644A0F987**

Amount of Each Receipt this Period  
500.00

**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: PAGE 34 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Franasiak**

Mailing Address 873 Coachway

City State Zip Code  
Annapolis MD 21401-6481

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

Name of Employer Occupation  
Williams and Jensen Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A4041A19C78514B7A9BE**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Regina Carls**

Mailing Address 1022 Fire Fox Ct.

City State Zip Code  
Saint Charles IL 60174-7846

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

Name of Employer Occupation  
Jp Morgan Chase Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A6B6B69913799494EB08**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Katie Palmer**

Mailing Address 650 Blackthorn Rd

City State Zip Code  
Winnetka IL 60093-2006

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : A91A5749976BC41F7AE6**

Amount of Each Receipt this Period  
1000.00

**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 35 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Weller**

Mailing Address 301 Clematis St  
Ste 3000

City State Zip Code  
West Palm Beach FL 33401-4609

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : A1879949241D849BB9D5**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jacob Shapiro**

Mailing Address 401 North Wabash Unit 49 F

City State Zip Code  
Chicago IL 60611-3798

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 07 / 2015

**Transaction ID : A2143E333FAA6498BB9A**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Janet St. Amand**

Mailing Address 54523 33rd St NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Information Requested Occupation Information Requested  
Self Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 05 / 2015

**Transaction ID : AFABAC5131247437A884**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. T. Gerald Wagner Jr.**

Mailing Address 7030 Arbor Ln  
Apt 302

City Northfield State IL Zip Code 60093-3368

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

Name of Employer Meeser Wagner Co. Occupation Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **570.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : A5A5A9ECC1C1A40EAA32**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Janet Gates**

Mailing Address 334 Ridge Ave

City Winnetka State IL Zip Code 60093-3842

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A950C9CC156ED461B8D9**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Walbert**

Mailing Address 308 Courtland Ave

City Park Ridge State IL Zip Code 60068-4050

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

Name of Employer Horizon Pharma Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : A360028712BCB4C07840**

Amount of Each Receipt this Period  
 250.00

**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: PAGE 37 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Gross**

Mailing Address 1185 Fairview Ln.

City State Zip Code  
Long Grove IL 60047-5073

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

Name of Employer Occupation  
Prairie Capitol Advisors, Inc. Investment Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : AA394DA90CBC74DB1B63**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eliot Weinstein**

Mailing Address 5328 W. Pensacola Ave.

City State Zip Code  
Chicago IL 60641-1308

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : A5344A8D55918437DBFD**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 1320 N State Parkway, Apt 4C

City State Zip Code  
Chicago IL 60610-2455

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A269EDE69C1DD4CCCAC4**

Amount of Each Receipt this Period  
1500.00

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

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

2025.00

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

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

FOR LINE NUMBER: PAGE 38 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Amy George**

Mailing Address 1350 W Grand Ave

City State Zip Code  
Chicago IL 60642-6406

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

Name of Employer Occupation  
Self Employed Photographer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 30 / 2015**

**Transaction ID : A0E8F5271A3E54F5CBF5**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**Salonon Dayan**

Mailing Address 2837 Sheridan Rd

City State Zip Code  
Evanston IL 60201-1729

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : A701F257EDFFD40D1865**

Amount of Each Receipt this Period  
**400.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Denis J. Healy Sr.**

Mailing Address 20 E Cedar  
Apt 14A

City State Zip Code  
Chicago IL 60611-5116

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

Name of Employer Occupation  
Turtle Wax Ceo

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 05 / 2015**

**Transaction ID : A035A9192522144CAB46**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4100.00**

**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 39 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Hammes**

Mailing Address 725 Redwood Lane

City State Zip Code  
Glencoe IL 60022-2031

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

Name of Employer Occupation  
Linda Warren Projects Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2015

**Transaction ID : A67D01DEE1D5D4DC69C9**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Lou Klobuchar**

Mailing Address 14 Crosswicks

City State Zip Code  
North Barrington IL 60010-6929

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : AE39D48A6CC6C4F76B62**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Eliot Weinstein**

Mailing Address 5328 W. Pensacola Ave.

City State Zip Code  
Chicago IL 60641-1308

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2015

**Transaction ID : A8F3AA937C3F84D69A5E**

Amount of Each Receipt this Period  
10.00

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

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

5410.00

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

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

FOR LINE NUMBER: PAGE 40 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Isherwood**

Mailing Address 505 S Lincoln Ln

City State Zip Code  
Arlington Heights IL 60005-2108

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

Name of Employer Occupation  
Uop Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : A56EF9DF954774A40BAB**

Amount of Each Receipt this Period  
 200.00

400.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jo Ann Merlau**

Mailing Address 1095 Fisher Ln

City State Zip Code  
Winnetka IL 60093-1559

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 26 / 2015

**Transaction ID : A36CBBC25E5114F7FA9D**

Amount of Each Receipt this Period  
 2700.00

2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Gould**

Mailing Address 3035 Keystone Rd.

City State Zip Code  
Northbrook IL 60062-5107

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

Name of Employer Occupation  
Northwestern Mutual Wealth Management Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : A4587C4DA1BA74E8B897**

Amount of Each Receipt this Period  
 1000.00

1000.00

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

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

3900.00



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

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

FOR LINE NUMBER: PAGE 41 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

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

Mailing Address 2736 Valor Dr

City State Zip Code  
Glenview IL 60026-8054

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

Name of Employer Occupation  
Astellas Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : ABA07DF4F0476427BAE7**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Casey Urlacher**

Mailing Address 27250 N St. Marys Rd

City State Zip Code  
Libertyville IL 60048-9681

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : A630144A9D9D14B2AB5A**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Frank B. Chauner**

Mailing Address 666 Dundee Rd, Ste 903  
Ste 525

City State Zip Code  
Northbrook IL 60062-2735

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : ABCD51304E32E4C5F9C3**

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

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

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

FOR LINE NUMBER: PAGE 42 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Matt Wise**

Mailing Address 2329 California St NW

City Washington State DC Zip Code 20008-1638

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

Name of Employer CRS Occupation Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : A43335C29F03041C2B6E**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Karpeles**

Mailing Address 1606 E Course Dr

City Riverwoods State IL Zip Code 60015-1740

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

Name of Employer Greenberg Traurig Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 04 / 2015

**Transaction ID : AF34017C989F64310BBC**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Hatherly**

Mailing Address 65 Hillburn Ln

City North Barrington State IL Zip Code 60010-6925

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

Name of Employer Wynnchurch Capital Ltd. Occupation Venture Capitalist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A9746E472A8D34C49AB9**

Amount of Each Receipt this Period  
 2700.00

**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: PAGE 43 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Ross Jannotta**

Mailing Address 227 Maple Ct

City State Zip Code  
Lake Forest IL 60045-2414

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

Name of Employer Occupation  
William Blair & Company Money Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 12 2015

**Transaction ID : A05780501353446A2805**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Carol Anne Huff**

Mailing Address 2317 W Cullom Ave

City State Zip Code  
Chicago IL 60618-1615

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 30 2015

**Transaction ID : AE29999BF75334750A9C**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 19380 Hayden Ct

City State Zip Code  
Brookfield WI 53045-5126

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

Name of Employer Occupation  
Abbvie VP State Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 06 2015

**Transaction ID : AB24FBAE5A0A14697AE1**

Amount of Each Receipt this Period  
250.00

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

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

3950.00

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

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

FOR LINE NUMBER: PAGE 44 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Wunderlich**

Mailing Address 2430 Wendover Drive

City State Zip Code  
Naperville IL 60565-3255

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

Name of Employer Occupation  
Fidelity National Financial Title Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : A8894B79E8A1F4A7C82F**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Miles D. White**

Mailing Address 1313 N Green Bay Rd

City State Zip Code  
Lake Forest IL 60045-1107

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

Name of Employer Occupation  
Abbott Laboratories CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : A17FCCDF0A04B40A0B43**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Stein**

Mailing Address 1669 Marshall Dr

City State Zip Code  
Des Plaines IL 60018-1840

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

Name of Employer Occupation  
Illinois Auto Truck President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A1995E1236812451FB1F**

Amount of Each Receipt this Period  
5400.00

Reattribution Requested

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

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

8350.00

**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 45 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Barry Dunn**

Mailing Address 1041 Cherokee Rd

City State Zip Code  
Wilmette IL 60091-1322

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2015

**Transaction ID : A75C9E231DD44476CABC**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Luke Praxmarer**

Mailing Address 1306 Borders Drive

City State Zip Code  
Palatine IL 60067-6606

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

Name of Employer Occupation  
Corkill Insurance Insurance Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 29 / 2015

**Transaction ID : AF93D4E6D475A45BCAD5**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Hedien**

Mailing Address 2511 Crabtree Ln

City State Zip Code  
Northbrook IL 60062-3428

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : AF6336B6D0F6C4192855**

Amount of Each Receipt this Period  
500.00

**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 46 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Melissa Hayes**

Mailing Address 1090 North Lane

City Naperville State IL Zip Code 60540

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

Name of Employer Wymich Capital Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : AFF89A813170D4840801**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen R. Wilson**

Mailing Address 2448 Central Park Ave

City Evanston State IL Zip Code 60201-1812

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

Name of Employer CF Industries Holdings, Inc. Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AE689E2BDA98448E3851**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**J Campbell**

Mailing Address 1100 Pembridge Dr.  
Apt. 303

City Lake Forest State IL Zip Code 60045-4216

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : A23714266F60D42548C5**

Amount of Each Receipt this Period  
 250.00

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

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

5650.00

**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 47 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Kim Urban**

Mailing Address 483 Hawthorn Lane

City State Zip Code  
Winnetka IL 60093-4247

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : A91140930586941C6AF6**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Shawn Fagan**

Mailing Address 725 Bluff St

City State Zip Code  
Glencoe IL 60022-1504

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

Name of Employer Occupation  
Citadel Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A95AD29F832E447649CC**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Shelley Paulson**

Mailing Address 4936 Oak Ln

City State Zip Code  
Gurnee IL 60031-1939

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : AD01C330D5F9F4C4CAF4**

Amount of Each Receipt this Period  
250.00

**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 48 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Howard Horberg**

Mailing Address 289 Prospect Ave

City Highland Park State IL Zip Code 60035-3353

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : A1783352430454A929B6**

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Scott Falk**

Mailing Address 370 Sheridan Rd

City Winnetka State IL Zip Code 60093-2628

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : A1DE5BE656DAF492BA22**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Roger Grabowski**

Mailing Address 264 Sheridan Rd

City Winnetka State IL Zip Code 60093-1542

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

Name of Employer Duff R. Phelps, Llc Occupation Appraiser

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A9CB6A29FA14D4E8491F**

Amount of Each Receipt this Period  
 1000.00

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

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

2400.00



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

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

FOR LINE NUMBER: PAGE 49 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Linden**

Mailing Address 41 Riverside Dr

City State Zip Code  
New York NY 10024-6803

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : ABD2343ABD0F240FAA78**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Suzanne Baker**

Mailing Address 226 N Indiana St

City State Zip Code  
Elmhurst IL 60126-2943

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

Name of Employer Occupation  
IPX1031 Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : A38F648CD897648748A0**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Behrends Foster**

Mailing Address 1722 N Nelson St

City State Zip Code  
Arlington VA 22207-3643

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A0662847A8C2143CBBFC**

Amount of Each Receipt this Period  
500.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 50 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stewart S. Hudnut**

Mailing Address 56 Indian Hill Rd

City State Zip Code  
Winnetka IL 60093-3938

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : ADDF974EEA0FD48E9B0D**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Quinn Stepan**

Mailing Address 200 Linden St.

City State Zip Code  
Winnetka IL 60093-3862

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

Name of Employer Occupation  
Stepan Company Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A2E38A5424C674F7E9E1**

Amount of Each Receipt this Period  
 700.00

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

Mailing Address 1105 Princeton Pl

City State Zip Code  
Wilmette IL 60091-1315

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

Name of Employer Occupation  
Mayer Brown Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : A709CD1E2E3F841C1854**

Amount of Each Receipt this Period  
 2700.00

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

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

4400.00

**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 51 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Suzanne H. Dickes**

Mailing Address 365 Chestnut St

City Winnetka State IL Zip Code 60093-2414

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

Name of Employer None Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : A99B018AEC527412396C**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. J. Wayne Hamman**

Mailing Address 1211 Crane Blvd

City Libertyville State IL Zip Code 60048-3013

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A381408E5177F42228B7**

Amount of Each Receipt this Period  
 150.00

**C.** Full Name (Last, First, Middle Initial)  
**John Doran**

Mailing Address 15321 Masonwood Dr

City Gaithersburg State MD Zip Code 20878-3611

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A2A1375E16B0348EEAC0**

Amount of Each Receipt this Period  
 1000.00

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

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

1650.00

**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 52 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tim McGivern**

Mailing Address 1335 R St. NW, #2

City Washington State DC Zip Code 20009-4322

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

Name of Employer AT and T Occupation Vice President Federal Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : A9C2F347DCA2B49C4B08**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Martin Diloreto**

Mailing Address 333 Oak St

City Glen Ellyn State IL Zip Code 60137-3815

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A134A029981314701AC4**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Hamilton Hill**

Mailing Address 425 Park

City Glencoe State IL Zip Code 60022-1527

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2015

**Transaction ID : AB60A33EC0DE946D99F7**

Amount of Each Receipt this Period  
 1000.00

**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 53 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy Duffy**

Mailing Address 290 Shadowood Lane

City Northfield State IL Zip Code 60093-1016

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A6D4996AF8D244476B67**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kenton Stewart**

Mailing Address 439 Moraine Rd.

City Highland Park State IL Zip Code 60035-1937

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

Name of Employer Astellas Occupation Managed Care

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 08 / 2015

**Transaction ID : AC0F9E9B828FA4A4C8AC**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Luke Praxmarer**

Mailing Address 1306 Borders Drive

City Palatine State IL Zip Code 60067-6606

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

Name of Employer Corkill Insurance Occupation Insurance Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : A547D61AA2CA54949AAC**

Amount of Each Receipt this Period  
**250.00**

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

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

**3200.00**

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

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

FOR LINE NUMBER: PAGE 54 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Kaplan**

Mailing Address 712 15 St SE

City Washington State DC Zip Code 20003-3019

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

Name of Employer Abbvie Occupation Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A0B6D54A1D28745D0AE4**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles G. Denison**

Mailing Address 1526 Woodlark Dr

City Northbrook State IL Zip Code 60062-4731

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

Name of Employer Moelis and Co Occupation Investment Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : AFBF5DA33258D42AC9EC**

Amount of Each Receipt this Period  
 5400.00

Reattribution Requested

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

Mailing Address 24 Country Lane

City Northfield State IL Zip Code 60093-1003

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 20 / 2015

**Transaction ID : A17D315BC08BE4399921**

Amount of Each Receipt this Period  
 2700.00

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

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

9100.00

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

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

FOR LINE NUMBER: PAGE 55 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Mortier**

Mailing Address 3962 Georgetown CT NW

City Washington State DC Zip Code 20007-2127

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

Name of Employer Ryan, Mackinnon, et al Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2015

**Transaction ID : AF55F3ABF396F48DAB8F**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John E. Callahan**

Mailing Address 11 Regent Wood Rd

City Northfield State IL Zip Code 60093-2728

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : AAD8FF64BE5D94660B5D**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 4416 N. Camden Lane

City Crestwood State KY Zip Code 40014-7536

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

Name of Employer Abbvie Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : A60219BFB9F5241F28EB**

Amount of Each Receipt this Period  
 250.00

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

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

1350.00

**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 56 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dmitry Farbman**

Mailing Address 3461 Cornflower Trl

City Northbrook State IL Zip Code 60062-6341

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

Name of Employer Ubs Occupation Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A389D878C182D41559DB**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jason Peltz**

Mailing Address Bartlit Beck  
54 West Hubbard Street, Suite 300

City Chicago State IL Zip Code 60654-5697

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

Name of Employer Bartlit Beck Herman Palenchar & Scott Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : A3B8B856279E4420A8CC**

Amount of Each Receipt this Period  
**2700.00**

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

Mailing Address 6006 W. 73rd Street

City Chicago State IL Zip Code 60638-6106

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

Name of Employer Northstar Aerospace Occupation VP/ General Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : AB62314517FFA40F99B9**

Amount of Each Receipt this Period  
**250.00**

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

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

**3200.00**



**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 57 OF 203
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bruce Blair</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015
Mailing Address 620 Ridge Rd		<b>Transaction ID : ACD5395529A3246B18F0</b>
City Winnetka	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Amount of Each Receipt this Period 425.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Mr. James Sullivan</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2015
Mailing Address 711 Dimmeydale Dr		<b>Transaction ID : A3C2D4161123F4287A40</b>
City Deerfield	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Abbott Laboratories	Occupation Science	Amount of Each Receipt this Period 500.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Linda Shields</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 985 Melody Rd		<b>Transaction ID : A164C01444A1F4C42BCC</b>
City Lake Forest	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Information Requested	Occupation Information Requested	Amount of Each Receipt this Period 300.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<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: PAGE 58 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Winifred G Crawford**

Mailing Address 676 Lake Rd

City Lake Forest State IL Zip Code 60045-2303

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : AF47F48878B674B9CBA7**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Calvin McClary**

Mailing Address 109 E Orchard St

City Elmhurst State IL Zip Code 60126-3933

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : AA7109268CFAD4B09999**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Seifman**

Mailing Address 300 N La Salle Dr

City Chicago State IL Zip Code 60654-3406

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

Name of Employer Kirkland & Ellis, LLP Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : ABDE5826800C54126AC5**

Amount of Each Receipt this Period  
 750.00

**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 59 OF 203
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Mr. Ron Peterson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 171 Kimberly Ln		<b>Transaction ID : AEE287F28FDC6453193D</b>
City Lake Forest	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Jenner & Block	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Mr. Dietrich M. Gross</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2015
Mailing Address 769 Michigan Ave		<b>Transaction ID : A1528AD3093AE464381E</b>
City Wilmette	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Jupiter Oxygen Corp.	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>Mr. William Sick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 03 / 2015
Mailing Address 565 Sheridan Rd		<b>Transaction ID : AF0CE5881C1CB4BAFB16</b>
City Winnetka	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Business Resources International	Occupation Manager	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3900.00
<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 60 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Allan J. Reich**

Mailing Address 936 Skokie Ridge Dr

City Glencoe	State IL	Zip Code 60022-1434
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FEC ID number of contributing federal political committee. **C**

Name of Employer Seyfarth Shaw, Llp	Occupation Attorney
--	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : A67297F0B3AD14E3CB32**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Matt Eggemeyer**

Mailing Address 277 Ridge Ave

City Winnetka	State IL	Zip Code 60093-3840
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FEC ID number of contributing federal political committee. **C**

Name of Employer Keats Manufacturing Company	Occupation Coo
---	-------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2015

**Transaction ID : ABA6A3C756D594A1A8A5**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael L. Keiser**

Mailing Address 2450 N Lakeview Ave

City Chicago	State IL	Zip Code 60614-2878
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bdgr. Inc.	Occupation Bus
--------------------------------	-------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : A88816362E5354E289C0**

Amount of Each Receipt this Period  
2700.00

**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 61 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Benjamin Dowell**

Mailing Address 1149 Briargate Dr

City Highland Park State IL Zip Code 60035-2900

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

Name of Employer RW Baird Occupation Investment Banking

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : AAE62BE6CBF00421E822**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Hollis Rademacher**

Mailing Address 1719 Lowell Ln

City Lake Forest State IL Zip Code 60045-3784

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : A5D82FC2A8E9A42F584B**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Brian O'Keane**

Mailing Address 560 Lakeland Dr.

City Lake Bluff State IL Zip Code 60044-2806

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

Name of Employer Agri Bank Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A0420F6E1980D4B4E91C**

Amount of Each Receipt this Period  
250.00

**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 62 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Mulcahy**

Mailing Address 2623 N Dayton St

City Chicago State IL Zip Code 60614-2305

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : A87EB9C968BCC45E0A7D**

Amount of Each Receipt this Period  
 1350.00

**B.** Full Name (Last, First, Middle Initial)  
**Sally Canfield**

Mailing Address 108 South Fayette St

City Alexandria State VA Zip Code 22314-2919

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : ADE53710C0E7E4308BCC**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Stepankovskiy**

Mailing Address 1046 Hillside Ave

City Deerfield State IL Zip Code 60015-2813

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

Name of Employer Information Requested Occupation Information Requested  
 UBS Financial Services Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2015

**Transaction ID : A5D403E3EFBA54A0DAFC**

Amount of Each Receipt this Period  
 2700.00

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

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

4300.00

**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 63 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth Stern**

Mailing Address 3153 Turtle Head Peak Dr

City Las Vegas State NV Zip Code 89135-1647

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

Name of Employer Self Employed Occupation Author

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A85ED6CD3A34348FE954**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Rebecca Kenyon**

Mailing Address 545 Essex Rd

City Kenilworth State IL Zip Code 60043-1176

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : A9F637688856D42F9918**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Benjamin Gibson**

Mailing Address 600 N Lake Shore Dr  
Apt 3709

City Chicago State IL Zip Code 60611-3148

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : ACE61D31734A64245BD2**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1700.00**

**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 64 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Edward R. James**

Mailing Address 70 Garden Lane

City State Zip Code  
Winnetka IL 60093-4700

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

Name of Employer Occupation  
Edward R. James Partners, Llc Real Estate Development

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1509.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 30 / 2015

**Transaction ID : AB17242D3B36F4A94B9F**

Amount of Each Receipt this Period  
59.00

**B.** Full Name (Last, First, Middle Initial)  
**Derek Ferguson**

Mailing Address 135 Hawthorn Avenue

City State Zip Code  
Glencoe IL 60022-1727

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

Name of Employer Occupation  
Victory Park Capital Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 12 / 2015

**Transaction ID : AEFAE0F066D754322938**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Rajan Gill**

Mailing Address 3943 Sweet Briar Ct

City State Zip Code  
Frederick MD 21704-7882

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

Name of Employer Occupation  
Hiring Incentives, INC Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 08 / 2015

**Transaction ID : A28076B0B71A24C25AFE**

Amount of Each Receipt this Period  
1000.00

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

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

1309.00



**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 65 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John O'Rourke**

Mailing Address 11028 Stanmore Dr

City Potomac State MD Zip Code 20854-1525

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : A745B928566904F2AB66**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lauren O'Brien**

Mailing Address 1811 E St, NE

City Washington State DC Zip Code 20002-4601

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

Name of Employer Information Requested Occupation Information Requested

Republic Consulting Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2015

**Transaction ID : A313A2FC356D34B5B932**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**James Truettner**

Mailing Address 1065 Winding River Rd

City Vero Beach State FL Zip Code 32963-2550

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

Name of Employer Information Requested Occupation Information Requested

None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A7BEE7A8000604453A56**

Amount of Each Receipt this Period  
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene L. Shepp**

Mailing Address 541 Locust Rd

City State Zip Code  
Wilmette IL 60091-2269

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : AB803014A8D8A48ABA9D**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Isham Jr.**

Mailing Address 701 Park Pl

City State Zip Code  
Lake Bluff IL 60044-2613

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : A8CF5460C5A534F2DB76**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Martin Edwards**

Mailing Address 2433 Saranae Ct

City State Zip Code  
Chicago IL 60626

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 02 / 2015

**Transaction ID : AADBA67FD88274392A66**

Amount of Each Receipt this Period  
250.00

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

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

1400.00

**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 67 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jovita Carranza**

Mailing Address 9715 Woods Dr.  
Unit 2002

City Skokie State IL Zip Code 60077-4449

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

Name of Employer JCR Group Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A4C99A085FAFD46FAA42**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William A. Crane**

Mailing Address 863 Pembridge Dr

City Lake Forest State IL Zip Code 60045-4202

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : AC6F1C4D4124B46D099A**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2470 Deborah Dr

City Beachwood State OH Zip Code 44122-1602

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

Name of Employer KJB Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A5B8B38FB40D44D2A8C7**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 68 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Peter B. Bensinger**

Mailing Address 600 N Mayflower Rd

City State Zip Code  
Lake Forest IL 60045-2310

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

Name of Employer Occupation  
Bensinger Dupont and Assoc. Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : ACDA15163F3114884AC6**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry T. Nowak**

Mailing Address 917 Greenwood Ave

City State Zip Code  
Wilmette IL 60091-1751

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : AE1AC358C5E3542ED949**

Amount of Each Receipt this Period  
2300.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Abraham Katz**

Mailing Address 2667 Lisa Ct

City State Zip Code  
Northbrook IL 60062-7625

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

Name of Employer Occupation  
Self Employed Broker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : AD20929F368F54425A11**

Amount of Each Receipt this Period  
500.00

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 69 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Henry Kleeman**

Mailing Address 1230 S Wilson Dr

City State Zip Code  
Lake Forest IL 60045-3547

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 30 / 2015

**Transaction ID : ADD1F88320835457A99E**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Makula**

Mailing Address 7201 W. Keeney St.

City State Zip Code  
Niles IL 60714-3060

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 01 / 2015

**Transaction ID : A1B9B32DE71624712883**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Harold Kaplan**

Mailing Address 823 Kimballwood Ln

City State Zip Code  
Highland Park IL 60035-3623

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

Name of Employer Occupation  
Foley & Lardner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 31 / 2015

**Transaction ID : A9B15F4E6743D45C4864**

Amount of Each Receipt this Period  
300.00

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

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

2400.00

**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 70 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Nemeroff**

Mailing Address 55 E Erie St  
Apt 4902

City Chicago State IL Zip Code 60611-2262

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

Name of Employer Vedder Price Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : A755E7F389D1D4BB68B6**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Adm. Robert H. Shumaker**

Mailing Address 7901 Wolf Run Hills Rd

City Fairfax Station State VA Zip Code 22039-2101

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : AE27B350B4D144C65932**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Miles D. White**

Mailing Address 1313 N Green Bay Rd

City Lake Forest State IL Zip Code 60045-1107

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

Name of Employer Abbott Laboratories Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : ACFFCEDBE8E6241B5A32**

Amount of Each Receipt this Period  
 2700.00

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

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

5900.00

**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 71 OF 203
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Timothy Duffy</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 290 Shadowood Lane		<b>Transaction ID : A5C23D88FB BBB4C15BFE</b>	
City Northfield	State IL	Zip Code 60093-1016	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Kirkland & Ellis, LLP	Occupation Attorney		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark A. Fennell</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 19 / 2015	
Mailing Address 2323 Lawndale Ave		<b>Transaction ID : ABDF4BEFB254B4437858</b>	
City Evanston	State IL	Zip Code 60201-1851	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Kirkland & Ellis, LLP	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Daniel Peterson</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 1939 Burr Oak Dr W		<b>Transaction ID : AE99035AD493B4063AB0</b>	
City Glenview	State IL	Zip Code 60025-1803	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Zs Associates, Inc.	Occupation Marketing Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3950.00
<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 72 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George Cooper**

Mailing Address 139 Grafton St

City State Zip Code  
Chevy Chase MD 20815-3409

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

Name of Employer Occupation  
Forbes Tate Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 23 / 2015

**Transaction ID : AAAB6E5DACD0C4D90951**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Nancy B. Armstrong**

Mailing Address 2005 Southridge Ter

City State Zip Code  
Northfield IL 60093-1056

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : AD0B07A304CAC4ADD9D1**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sylvie M. Legere**

Mailing Address 510 Laurel Ave

City State Zip Code  
Wilmette IL 60091-2812

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

Name of Employer Occupation  
Foov Fitness Co-Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 24 / 2015

**Transaction ID : ABBC592E3849241AA9B9**

Amount of Each Receipt this Period  
2700.00

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

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

3400.00



**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 73 OF 203
	<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)  
**DOLD FOR CONGRESS**

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

Mailing Address 222 W Washington Ave

City State Zip Code  
Lake Bluff IL 60044-2036

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

Name of Employer Occupation  
Nixon Peabody LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 07 / 2015

**Transaction ID : A847C7A41E0EA4765B47**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth A. Harris Jr.**

Mailing Address 336 Raleigh Rd

City State Zip Code  
Kenilworth IL 60043-1254

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

Name of Employer Occupation  
Cadent Consulting Group Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : A8875F69DDE334F4A936**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Horton**

Mailing Address 521 Elmwood Ave

City State Zip Code  
Wilmette IL 60091-1973

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : A11864B947E2E4556965**

Amount of Each Receipt this Period  
500.00

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

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

3450.00

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

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

FOR LINE NUMBER: PAGE 74 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert A. Wilson**

Mailing Address 1171 Oakley Ave

City State Zip Code  
Winnetka IL 60093-1437

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : A9C4D7AA9F51E4420851**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gregory Aronin**

Mailing Address 7609 Sebago Rd.

City State Zip Code  
Bethesda MD 20817-4841

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

Name of Employer Occupation  
Marathon Pharmaceuticals Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : AD029143E8E634494A48**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Howard Simpson**

Mailing Address 271 Market Sq  
# 0

City State Zip Code  
Lake Forest IL 60045-1833

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

Name of Employer Occupation  
Self Employed Finance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : A6DD9961DAC1F48A7890**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 75 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Brien Leahy**

Mailing Address 1833 Belle Haven Dr.

City Grayslake State IL Zip Code 60030-7951

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

Name of Employer American Chartered Bank Occupation Community Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 12 / 2015

**Transaction ID : A7EDE44F6598949528FB**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Alan Myers**

Mailing Address 1866 Trails Edge Dr

City Northbrook State IL Zip Code 60062-3830

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

Name of Employer Credit Suisse Occupation Relationship Manager

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : A4108B2500A4642F2B7E**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerry James**

Mailing Address 140 Apple Tree Road

City Winnetka State IL Zip Code 60093-3702

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

Name of Employer Self Employed Occupation Builder

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : A5544E00FC3E44044B79**

Amount of Each Receipt this Period  
 250.00

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 76 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Paulsen**

Mailing Address 1757 W Henderson St

City State Zip Code  
Chicago IL 60657-1033

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

Name of Employer Occupation  
Lockton Companies VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : AC4267D86BF2D42ABA86**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marilyn Vetter**

Mailing Address 1302 130th Ave

City State Zip Code  
New Richmond WI 54017-6608

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

Name of Employer Occupation  
Horizon Pharmacy Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : A859F9AEE8C8F49FEB0A**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Barry Thomas**

Mailing Address PO Box 500219

City State Zip Code  
Atlanta GA 31150-0219

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

Name of Employer Occupation  
Arrow Exterminators Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A2052B391C6B44EACAAB**

Amount of Each Receipt this Period  
2000.00

**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 77 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Evans**

Mailing Address 100 Abbott Park Rd

City North Chicago State IL Zip Code 60064-3502

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : AA37FC54F39BB43D99F4**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 571 Drexel Ave

City Glencoe State IL Zip Code 60022-2067

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

Name of Employer Information Requested Occupation Information Requested

Denton US, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2015

**Transaction ID : ADEC4EFE9AF8F4436838**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Chickasaw Nation**

Mailing Address 520 Arlington St

City Ada State OK Zip Code 74820-2204

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : AC2CA8DA45C6B4306B20**

Amount of Each Receipt this Period  
 1000.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 78 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John Williams**

Mailing Address 1 American Square Ste 2000

City Indianapolis State IN Zip Code 46282-0004

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

Name of Employer Hall Render Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : A749BE9FE93F84280AEC**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick A. Martin**

Mailing Address PO Box 618

City Winnetka State IL Zip Code 60093-0618

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

Name of Employer Martin Investment Management Co., LLC Occupation Investment Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A4C2AA8DCB1334043BA2**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Suzanne Smart**

Mailing Address 6040 Arbor Ln Apt 301

City Northfield State IL Zip Code 60093-3367

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 07 / 2015

**Transaction ID : A5FDA384095CA4EC6A09**

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 79 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John R. Sagan**

Mailing Address 1314 Forest Ave

City State Zip Code  
Evanston IL 60201-4708

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

Name of Employer Occupation  
Mayes Brown Llp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : A2C30A120B24A4A6BB56**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lopresti**

Mailing Address 2520 Indian Ridge Dr

City State Zip Code  
Glenview IL 60026-1032

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

Name of Employer Occupation  
MMCL Group LLC Finance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : A9B4D8C72B1844656B12**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. William Dooley**

Mailing Address 31 W Kirke St

City State Zip Code  
Chevy Chase MD 20815-4260

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : A050C06AC46AD4D08800**

Amount of Each Receipt this Period  
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Lyman**

Mailing Address 240 Melrose Ave

City Kenilworth State IL Zip Code 60043-1152

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : A128F1A1518334BF883E**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Hammes**

Mailing Address 725 Redwood Ln

City Glencoe State IL Zip Code 60022-2031

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

Name of Employer Information Requested Occupation Information Requested

Kirkland & Ellis, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A0707F09788F444EC8EF**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Darren Willcox**

Mailing Address 9696 Mill Ridge Lane

City Great Falls State VA Zip Code 22066-2300

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

Name of Employer Information Requested Occupation Information Requested

W Strategies Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2015

**Transaction ID : A0F1867B7899C42FCA4E**

Amount of Each Receipt this Period  
 1000.00

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

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

3800.00



**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 81 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jon Ballis**

Mailing Address 216 Landis Ln

City State Zip Code  
Deerfield IL 60015-3420

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

Name of Employer Occupation  
Kirkland & Ellis, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 24 / 2015

**Transaction ID : A75698EAA19CA455A8B9**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert T. E. Lansing**

Mailing Address 390 E Wisconsin Ave  
# 300

City State Zip Code  
Lake Forest IL 60045-1480

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

Name of Employer Occupation  
West Minster Funds Real Estate Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
975.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : A59D1581DAF92411E90F**

Amount of Each Receipt this Period  
600.00

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

Mailing Address 1957 Dayton St  
Apt 1

City State Zip Code  
Chicago IL 60614-5563

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

Name of Employer Occupation  
Horizon Pharma Svp

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : A7D2BE8BF930F411EA2F**

Amount of Each Receipt this Period  
250.00

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

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

3550.00

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

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

FOR LINE NUMBER: PAGE 82 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sue J. Ogle**

Mailing Address 426 Silvergate Ave

City San Diego State CA Zip Code 92106-3328

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : AAEF93A01C08B41A7878**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward R. James**

Mailing Address 70 Garden Lane

City Winnetka State IL Zip Code 60093-4700

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

Name of Employer Edward R. James Partners, Llc Occupation Real Estate Development

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : A85392E13DCAD4CB8A6A**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mary Cunningham**

Mailing Address 2027 W Shakespeare

City Chicago State IL Zip Code 60647-4534

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

Name of Employer Chicago Deferred Exchange Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : A02FD277221B643F98B4**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Richard Benkin**

Mailing Address 521 North Pine Street

City State Zip Code  
Mount Prospect IL 60056-2056

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

Name of Employer Occupation  
Gallagher Bassett Services Analyst

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2015

**Transaction ID : AF0DD61B7AF57428E907**

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gadi Cohen**

Mailing Address 1122 Long Meadow Rd

City State Zip Code  
Northbrook IL 60062-1523

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

Name of Employer Occupation  
A and R Katz Management Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : A6BF12ACC5F6B445B9BA**

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Erika Gross**

Mailing Address 769 Michigan Ave

City State Zip Code  
Wilmette IL 60091-1956

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2015

**Transaction ID : A6050477C2058478081D**

Amount of Each Receipt this Period  
2500.00

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

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

5225.00

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

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

FOR LINE NUMBER: PAGE 84 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jorde Nathan**

Mailing Address 1499 Sheridan Rd

City Highland Park State IL Zip Code 60035-3446

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : AC1F0409E8F1C4031B63**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Newcorn**

Mailing Address 849 N. Franklin St

City Chicago State IL Zip Code 60610-8793

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

Name of Employer R. Jeffrey & Associates Occupation Ceo

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : A5B3F54FECE904A228FA**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Gundrum**

Mailing Address 3608 Russett Ln

City Northbrook State IL Zip Code 60062-4230

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

Name of Employer Axa Advisors Occupation Financial Planner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : AD924D4C1FFFA4FA092F**

Amount of Each Receipt this Period  
-2500.00

Reattribution to Spouse  
**[MEMO ITEM]**

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 85 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Mara Gundrum**

Mailing Address 3608 Russett Ln

City State Zip Code  
Northbrook IL 60062-4230

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : AE1C3C26D4C2D4725901**

Amount of Each Receipt this Period  
2500.00

Reattribution from Spouse

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Gundrum**

Mailing Address 3608 Russett Ln

City State Zip Code  
Northbrook IL 60062-4230

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

Name of Employer Occupation Information Requested  
Axa Advisors Financial Planner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : AEF919CAA0F2E4096A1F**

Amount of Each Receipt this Period  
2600.00

As Previously Reported

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew D. Lappin**

Mailing Address 630 Lincoln Ave

City State Zip Code  
Glencoe IL 60022-1421

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

Name of Employer Occupation Information Requested  
Shetland Properties President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2015

**Transaction ID : AE6CC41B1634E4437893**

Amount of Each Receipt this Period  
-2700.00

Reattribution to Spouse

**[MEMO ITEM]**

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

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

0.00

**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 86 OF 203
	<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)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Diane Lappin**

Mailing Address 630 Lincoln Ave

City State Zip Code  
Glencoe IL 60022-1421

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

Name of Employer Occupation  
None Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2015

**Transaction ID : A871E4395F59D4CCABA7**

Amount of Each Receipt this Period  
2700.00

Reattribution from Spouse

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew D. Lappin**

Mailing Address 630 Lincoln Ave

City State Zip Code  
Glencoe IL 60022-1421

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

Name of Employer Occupation  
Shetland Properties President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : A2247C561949747608EE**

Amount of Each Receipt this Period  
2700.00

As Previously Reported

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

241294.00

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

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

FOR LINE NUMBER: PAGE 87 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Grant Thornton PAC**

Mailing Address 175 W Jackson Boulevard  
Suite 2000

City Chicago State IL Zip Code 60604-2615

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AD8F09B538BCB493B8B7**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A5033D49D05AF47288AB**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Association Of Orthodontists PAC**

Mailing Address 401 North Linderbergh

City St. Louis State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C** C00293910

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AB5ED2AB3A681492A997**

Amount of Each Receipt this Period  
2500.00

**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: PAGE 88 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City State Zip Code  
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : AC951D45AF86E4D94A77**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**EQUIFAX INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1550 PEACHTREE STREET NW

City State Zip Code  
ATLANTA GA 30309

FEC ID number of contributing federal political committee. **C** C00143867

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2015

**Transaction ID : AF997109480CA4B13A82**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI)**

Mailing Address 1401 H Street NW  
Ste 1200

City State Zip Code  
Washington DC 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : ACFDAA91088D74809A56**

Amount of Each Receipt this Period  
1000.00

**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 89 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Stericycle, Inc. Political Action Committee**

Mailing Address 1155 21st St. NW  
Suite 300

City Washington State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C C00458018**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : A1A7E591E551041C487D**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Associated General Contractors Of America PAC**

Mailing Address 2300 Wilson Blvd.  
Suite 400

City Arlington State VA Zip Code 22201-5426

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A19212E188BBB4C73978**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**THE TRAVELERS COMPANIES, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address ONE TOWER SQUARE

City Hartford State CT Zip Code 06183-0001

FEC ID number of contributing federal political committee. **C C00376376**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A967E9FBE891B498295F**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

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

FOR LINE NUMBER: PAGE 90 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREATER TOMORROW POLITICAL ACTION COMMITTEE**

Mailing Address 600 PENNSYLVANIA AVENUE SE STE 330

City Washington State DC Zip Code 20003-6300

FEC ID number of contributing federal political committee. **C C00526715**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : A27D10121EC73438E9DF**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Credit Suisse Securities PAC**

Mailing Address 1201 F Street NW, Suite 450

City Washington State DC Zip Code 20004-1214

FEC ID number of contributing federal political committee. **C C00111559**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A9A67A5E250974D58B40**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**L-3 COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 THIRD AVENUE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C C00338087**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 19 / 2015

**Transaction ID : A85B1E78CAD61427780B**

Amount of Each Receipt this Period  
1000.00

**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 91 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP, INC. (PNC PAC)

A. Mailing Address 249 FIFTH AVENUE, 21ST FLOOR

City State Zip Code  
Pittsburgh PA 15222-2707

FEC ID number of contributing federal political committee. **C** C00035519

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 21 2015

Transaction ID : A97C2CCDE0B5C41C0B1A

Amount of Each Receipt this Period  
 1000.00

B. Full Name (Last, First, Middle Initial)  
**Invest In A Strong and Secure America - Issa Pac**

Mailing Address P.O. Box 3799

City State Zip Code  
Vista CA 92085-3799

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 14 2015

Transaction ID : A8E311A8F6FC743A68E2

Amount of Each Receipt this Period  
 1000.00

C. Full Name (Last, First, Middle Initial)  
**Grant Thornton PAC**

Mailing Address 175 W Jackson Boulevard  
Suite 2000

City State Zip Code  
Chicago IL 60604-2615

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 21 2015

Transaction ID : AF4B478D0C4234E9D905

Amount of Each Receipt this Period  
 1000.00

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 92 OF 203  
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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SIFMA PAC - Securities Industry and Financial Markets Assn**

Mailing Address 1101 New York Avenue, Suite 800

City Washington State DC Zip Code 20005-4279

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : A76F5B9AB168A4C7DB70**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Federation Of Exchange Accomodators 1031 PAC**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City Washington State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00426874

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : A85A4087EC3BC44B6B88**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Making Investments Majority Insured PAC**

Mailing Address 9070 Irvine Center Dr  
Ste 150

City Irvine State CA Zip Code 92618-4691

FEC ID number of contributing federal political committee. **C** C00564658

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A8E160FD322654014AEC**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**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

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(check only one)  
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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HDR, INC. PAC**

Mailing Address C/O COMERICA BANK, PAC SERVICES  
P.O. BOX 75000, MC2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00103903

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : A9F49DB9F1484449695D**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Rooney For Congress**

Mailing Address 2336 SE Ocean Boulevard  
#313

City State Zip Code  
Stuart FL 34996-3310

FEC ID number of contributing federal political committee. **C** C00432906

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A35398AEEAF92E4E7491A**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**SCOT FORGE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 8001 WINN ROAD

City State Zip Code  
Spring Grove IL 60081-9687

FEC ID number of contributing federal political committee. **C** C00580589

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : A6A283BBA241246CDBFF**

Amount of Each Receipt this Period  
2000.00

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

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

4000.00

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL**

Mailing Address 1125 Seventeenth Street, Northwest

City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A884054EB42BC45BBA9C**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AE5CA7EA8783848A8A72**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Liberty and Prosperity PAC**

Mailing Address 19 Cattano Avenue

City Morristown State NJ Zip Code 07960-6839

FEC ID number of contributing federal political committee. **C** C00387175

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : A72688045AFF74F45ACD**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LEE PAC**

Mailing Address 47 Flintlock Dr

City State Zip Code  
Shirley NY 11967-2758

FEC ID number of contributing federal political committee. **C C00573626**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : A290D001B24154A448CE**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**JET PAC**

Mailing Address PO BOX 2385

City State Zip Code  
OTTAWA IL 61350

FEC ID number of contributing federal political committee. **C C00522425**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A795C68B5B5D24718A73**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**VOYA FINANCIAL, INC., POLITICAL ACTION COMMITTEE (VOYA FINANCIAL PAC)**

Mailing Address 230 PARK AVENUE  
C/O CHIEF LEGAL OFFICER

City State Zip Code  
NEW YORK NY 10169

FEC ID number of contributing federal political committee. **C C00184028**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 16 / 2015

**Transaction ID : AC604076433F64A8184A**

Amount of Each Receipt this Period  
1000.00

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

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

8000.00

**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 96 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Freedom and Security PAC**

Mailing Address 228 S. Washington St., Ste. 115  
Suite 115

City State Zip Code  
Alexandria VA 22314-5404

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 31 / 2015

**Transaction ID : A5B975D2A0008489483A**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corporation Employees' PAC**

Mailing Address 1550 Crystal Drive  
Suite 300

City State Zip Code  
Arlington VA 22202-4110

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 20 / 2015

**Transaction ID : AFF444B004C6949C4840**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE OPTIONS CLEARING CORPORATION PAC**

Mailing Address 1 NORTH WACKER DRIVE  
SUITE 500

City State Zip Code  
CHICAGO IL 60606

FEC ID number of contributing federal political committee. **C** C00255877

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 08 / 2015

**Transaction ID : AB7BDF129F51F4B65AD1**

Amount of Each Receipt this Period  
1000.00

**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 97 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)**

Mailing Address 409 12th Street, SW

City Washington State DC Zip Code 20024-2125

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : AE071D55BA90E4DCC9DE**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ubs Americas Inc. PAC (Ubs Pac)**

Mailing Address 1501 K Street NW Suite 1100

City Washington State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AC1CBCFFB7E449A09B0**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Rga Reinsurance Company Federal PAC**

Mailing Address 1370 Timberlake Manor Parkway

City Chesterfield State MO Zip Code 63017-6039

FEC ID number of contributing federal political committee. **C** C00461129

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A6FC6E4EC633C4CC79AB**

Amount of Each Receipt this Period  
 2000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 98 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Fund For American Opportunity**

Mailing Address P.O. Box 65796

City Washington State DC Zip Code 20035-5796

FEC ID number of contributing federal political committee. **C** C00336297

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : AC78FE9AEF18B484BA8A**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION OF AIR MEDICAL SERVICES POLITICAL ACTION COMMITTEE**

Mailing Address 909 NORTH WASHINGTON STREET  
SUITE 410

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00410431

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AF7E4EEC743504CECAA2**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**LUNDBECK LLC EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address FOUR PARKWAY NORTH  
SUITE 200

City DEERFIELD State IL Zip Code 60015

FEC ID number of contributing federal political committee. **C** C00491118

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 19 / 2015

**Transaction ID : ADDEA90DA96A34BEBA86**

Amount of Each Receipt this Period  
1000.00

**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

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**General Electric Company PAC (GEPAC)**

Mailing Address 1299 Pennsylvania Avenue, NW  
Ste 900

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 05 / 2015**

**Transaction ID : AB966BD276E234726B39**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Exelon Corporation Political Action Committee**

Mailing Address 101 Constitution Avenue NW, Suite

City Washington State DC Zip Code 20001-2137

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**11000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 16 / 2015**

**Transaction ID : A8703C79EAE96466D93D**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Wal-Mart Stores Inc. Pac For Responsible Government**

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 21 / 2015**

**Transaction ID : A044ED6AC4CE749B9AD6**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4000.00**

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

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

FOR LINE NUMBER: PAGE 100 OF 203  
(check only one)  
 11a  11b  11c  11d  
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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corporation Employees' PAC**

Mailing Address 1550 Crystal Drive  
Suite 300

City State Zip Code  
Arlington VA 22202-4110

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2015

**Transaction ID : AC363AFB14BA54047BB0**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dow Chemical Company Employees PAC**

Mailing Address 2030 Dow Center

City State Zip Code  
Midland MI 48674-1500

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : AD16AB56E0B6D450F93C**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
THE GOODYEAR TIRE & RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR GOOD GOVERNMENT FUND)

Mailing Address 200 INNOVATION WAY

City State Zip Code  
AKRON OH 44316

FEC ID number of contributing federal political committee. **C C00100131**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : A00948B4124764A35A38**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 101 OF 203  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A. Deere & Company PAC (Aka John Deere PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 John Deere Place  
 City State Zip Code  
 Moline IL 61265-8010  
 FEC ID number of contributing federal political committee. **C C00204099**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015  
**Transaction ID : A4686FCA5B3D3465CB4A**  
 Amount of Each Receipt this Period  
 5000.00

**B. American College Of Cardiology Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2400 N Street NW  
 City State Zip Code  
 Washington DC 20037-1153  
 FEC ID number of contributing federal political committee. **C C00375360**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015  
**Transaction ID : AFBFC0553BAFB4340B2D**  
 Amount of Each Receipt this Period  
 1000.00

**C. CORN REFINERS ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 PENNSYLVANIA AVENUE NW  
 SUITE 950  
 City State Zip Code  
 WASHINGTON DC 20006  
 FEC ID number of contributing federal political committee. **C C00554071**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : AD7E3A9E56B9C44C2B80**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

6500.00

**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 102 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JUMP INTO ACTION FOR CONSERVATIVES TO KEEP OUR IDEAS ELEVATED PAC**

Mailing Address **PO BOX 26141**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00582726**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 29 / 2015**

**Transaction ID : AF41E66CA220D4975B12**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**DIAGEO NORTH AMERICA, INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE**

Mailing Address **801 MAIN AVENUE**

City **NORWALK** State **CT** Zip Code **06851**

FEC ID number of contributing federal political committee. **C C00034470**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **349.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 01 / 2015**

**Transaction ID : AECC9B6A52AB14621942**

Amount of Each Receipt this Period  
**349.32**

In-kind: Event Facility Rental

**C.** Full Name (Last, First, Middle Initial)  
**Thunderbolt PAC**

Mailing Address **824 S Milledge Ave Ste 101**

City **Athens** State **GA** Zip Code **30605-1332**

FEC ID number of contributing federal political committee. **C C00574376**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 31 / 2015**

**Transaction ID : A6C89DFBE74D94930B3E**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2349.32**

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THRIVENT FINANCIAL FOR LUTHERANS - EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address **POST OFFICE BOX 1892**

City **Appleton** State **WI** Zip Code **54912-1892**

FEC ID number of contributing federal political committee. **C C00121319**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 29 / 2015**

**Transaction ID : A149A7B005CB440D18D2**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**GOOGLE INC. NETPAC**

Mailing Address **25 MASSACHUSETTS AVE, NW  
9TH FLOOR**

City **Washington** State **DC** Zip Code **20001-1430**

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 13 / 2015**

**Transaction ID : A2B6B8533C8774CA8BC1**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**WHAT A COUNTRY! PAC**

Mailing Address **824 S MILLEDGE AVE STE 101**

City **Athens** State **GA** Zip Code **30605-1332**

FEC ID number of contributing federal political committee. **C C00571646**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
**12 / 21 / 2015**

**Transaction ID : AF58597F10EFB475B8F1**

Amount of Each Receipt this Period  
**1000.00**

**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 104 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Exelon Corporation Political Action Committee**

Mailing Address 101 Constitution Avenue NW, Suite

City Washington State DC Zip Code 20001-2137

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A8043B9B5172945F4AEC**

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
**Morgan Stanley PAC**

Mailing Address 1585 Broadway  
Floor 9

City New York State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A2D41FFED79A04251B27**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS POLITICAL ACTION COMMITTEE (PA PAC)**

Mailing Address 2318 MILL ROAD  
SUITE 1300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00122499

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : AE2F00C5DC3F8471EBA6**

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 105 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address 550 SOUTH TRYON STREET

City State Zip Code  
CHARLOTTE NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A96C8191BB0FD4E9AA36**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wine and Spirits Wholesalers Of America, Inc. PAC**

Mailing Address 805 Fifteenth St NW  
Suite 430

City State Zip Code  
Washington DC 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9472.44

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AEBF6CE970AEE45ECA0A**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Council Of Life Insurers Political Action Committee**

Mailing Address 101 Constitution Ave NW  
Ste 700

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : ADF45A0A90BC24E989DB**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

**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 106 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Federal Express PAC**

Mailing Address 942 South Shady Grove Road  
1st Floor

City State Zip Code  
Memphis TN 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AA7721E04884549DA9CF**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**HOLDEN INDUSTRIES INC PAC (HOLDEN PAC)**

Mailing Address 500 LAKE COOK ROAD SUITE 400

City State Zip Code  
Deerfield IL 60015-5269

FEC ID number of contributing federal political committee. **C** C00543561

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 12 / 2015

**Transaction ID : A2FDDCADA20134B179A3**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Thermo Fisher Scientific, Inc. PAC**

Mailing Address 81 Wyman Street

City State Zip Code  
Waltham MA 02451-1223

FEC ID number of contributing federal political committee. **C** C00292318

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : AF6B771434C924C1B950**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CIGNA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SOUTH BUILDING SUITE 835

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00085316**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : A3D4E62BEB81240D5A01**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Deere & Company PAC (Aka John Deere PAC)**

Mailing Address 1 John Deere Place

City Moline State IL Zip Code 61265-8010

FEC ID number of contributing federal political committee. **C C00204099**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : ACC62B8572BE948998B2**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Bankers Association Pac (Bankpac)**

Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : A5567BA589D2041EF9E6**

Amount of Each Receipt this Period  
2000.00

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

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

9500.00

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

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

FOR LINE NUMBER: PAGE 108 OF 203  
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 11a  11b  11c  11d  
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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROLLINS INC POLITICAL ACTION COMMITTEE**

Mailing Address 2170 PIEDMONT ROAD NE

City Atlanta State GA Zip Code 30324-4135

FEC ID number of contributing federal political committee. **C** C00131219

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A9AAE3BD3EC934532BA9**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
PRIME POLICY GROUP LLC/BURSON-MARSTELLER POLITICAL ACTION COMMITTEE (PRIME POLICY BURSON-MARSTELLER)

Mailing Address 1110 VERMONT AVENUE  
NWSUITE 1000

City Washington State DC Zip Code 20005-3544

FEC ID number of contributing federal political committee. **C** C00201863

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A9563D3B693444D39A11**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)**

Mailing Address 1166 AVENUE OF THE AMERICAS

City New York State NY Zip Code 10036-2708

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A390C6CA61B27493C987**

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**

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City State Zip Code  
Washington DC 20004-2524

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2015

Transaction ID : A2467BFFA8E6345B7904

Amount of Each Receipt this Period  
 1500.00

Full Name (Last, First, Middle Initial)  
National Federation Of Independent Business/Save Americas Free Ent Trust (NFIB Safe Trust)

Mailing Address 1201 F Street NW Suite 200

City State Zip Code  
Washington DC 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

Transaction ID : A5F7AD1ED9D074A35B5A

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**RODNEY PAC**

Mailing Address PO BOX 573

City State Zip Code  
EDWARDSVILLE IL 62025

FEC ID number of contributing federal political committee. **C** C00573493

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

Transaction ID : A4D3C4DB2220D4ACFBE2

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... 3500.00

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

3500.00

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

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

FOR LINE NUMBER: PAGE 110 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**COMMUNITY BANKERS ASSOCIATION OF ILLINOIS FEDPAC**

Mailing Address 901 COMMUNITY DRIVE

City Springfield State IL Zip Code 62703-5170

FEC ID number of contributing federal political committee. **C C00291914**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : AF1E0D6C73AD74B84954**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION PAC**

Mailing Address 30 HUNTER LANE

City Camp Hill State PA Zip Code 17011-2400

FEC ID number of contributing federal political committee. **C C00104083**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 03 / 2015

**Transaction ID : A499B79962EB64C01814**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Association Of Insurance and Financial Advisors PAC**

Mailing Address 2901 Telestar Ct.

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A2E8CBB8066584325B5E**

Amount of Each Receipt this Period  
 1000.00

**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 111 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Ubs Americas Inc. PAC (Ubs Pac)</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 1501 K Street NW Suite 1100		<b>Transaction ID : AB3C50D965D6E47F3ABC</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. <b>C C00012245</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00	

Full Name (Last, First, Middle Initial) <b>National Restaurant Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 03 / 2015
Mailing Address 2055 L Street NW		<b>Transaction ID : AC33941E55E4745D1844</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. <b>C C00003764</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) <b>Aon PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 10 / 2015
Mailing Address 200 East Randolph Dr		<b>Transaction ID : AF0260ECE2160422DBF3</b>
City Chicago	State IL	
FEC ID number of contributing federal political committee. <b>C C00211250</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 112 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE PROCTER & GAMBLE COMPANY GOOD GOVERNMENT FUND**

Mailing Address **ONE PROCTER & GAMBLE PLAZA**

City State Zip Code  
**CINCINNATI OH 45202**

FEC ID number of contributing federal political committee. **C C00257329**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : A086922AC01C445F9A5D**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dow Chemical Company Employees PAC**

Mailing Address **2030 Dow Center**

City State Zip Code  
**Midland MI 48674-1500**

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 05 / 2015**

**Transaction ID : A3019601F0CD741F984C**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Council Of Insurance Agents and Brokers PAC**

Mailing Address **701 Pennsylvania Avenue Nw, Suite**

City State Zip Code  
**Washington DC 20004-2661**

FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 30 / 2015**

**Transaction ID : A1ABF6828BA62485DBF7**

Amount of Each Receipt this Period  
**2500.00**

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

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

**4500.00**



**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 113 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Credit Suisse Securities PAC**

Mailing Address 1201 F Street NW, Suite 450

City Washington State DC Zip Code 20004-1214

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : AA6985DB30CBC4F15912**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AD61D1AC2E22943789F5**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Institute of CPAs PAC (AICPA PAC)**

Mailing Address 220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AE51D1E6DB7824FB08EE**

Amount of Each Receipt this Period  
 1000.00

**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

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(check only one)  
 11a  11b  11c  11d  
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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**The Boeing Company Political Action Committee**

Mailing Address 929 Long Bridge Dr

City State Zip Code  
Arlington VA 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 19 / 2015

**Transaction ID : A493FB83B575F4876BED**

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAK)**

Mailing Address 1201 15TH STREET, NW

City State Zip Code  
Washington DC 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A26B5E3DA181D48A88C2**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**National Fisheries Institute (Fishpac)**

Mailing Address 7918 Jones Branch Drive  
Suite 700

City State Zip Code  
Mclean VA 22102-3319

FEC ID number of contributing federal political committee. **C** C00101204

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A835A6099AB4841C9B94**

Amount of Each Receipt this Period  
1000.00

**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 115 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address **9900 BREN ROAD EAST**

City State Zip Code  
**MINNETONKA MN 55343**

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 08 2015**

Transaction ID : **A87ECB154DB6D4D33958**

Amount of Each Receipt this Period  
**2000.00**

B. Full Name (Last, First, Middle Initial)  
**The Boeing Company Political Action Committee**

Mailing Address **929 Long Bridge Dr**

City State Zip Code  
**Arlington VA 22202-4208**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **15000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 19 2015**

Transaction ID : **A04A97E9DE21E4FDFB47**

Amount of Each Receipt this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address **800 10th St NW  
2 Citycenter Ste 400**

City State Zip Code  
**Washington DC 20001-5188**

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 31 2015**

Transaction ID : **A18E06F8304824E4F908**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4000.00</b>
<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 116 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE KRAFT HEINZ COMPANY POLITICAL ACTION COMMITTEE (KRAFTPAC)**

Mailing Address 975 F STREET, NW  
SUITE 1025

City Washington State DC Zip Code 20004-1485

FEC ID number of contributing federal political committee. **C C00077701**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A33070C7361CF4153B0C**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Pfizer Inc. PAC**

Mailing Address 235 E 42nd Street

City New York State NY Zip Code 10017-5703

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : A8698144D71144E45A82**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Culac - PAC Of Credit Union National Association**

Mailing Address 601 Pennsylvania Avenue, NWSouth B  
Ste 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 03 / 2015

**Transaction ID : A2B803570FC1847B6897**

Amount of Each Receipt this Period  
 1000.00

**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 117 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**VRIDE POLITICAL ACTION COMMITTEE (VRIDE INC PAC)**

Mailing Address 1220 RANKIN DRIVE

City State Zip Code  
TROY MI 48083

FEC ID number of contributing federal political committee. **C** C00489096

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A215F99C3C3964171816**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City State Zip Code  
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : A7A48738037574B0EA23**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Bank Of America Federal PAC**

Mailing Address 1455 Pennsylvania Ave., NW  
Suite 950

City State Zip Code  
Washington DC 20004-1043

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A08D8B42E7E704218ADD**

Amount of Each Receipt this Period  
2000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 118 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Wine and Spirits Wholesalers Of America, Inc. PAC**

Mailing Address 805 Fifteenth St NW  
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**9472.44**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 05 / 2015**

**Transaction ID : A4FFBA5BAE206426884C**

Amount of Each Receipt this Period  
**2472.44**

**B.** Full Name (Last, First, Middle Initial)  
**SIFMA PAC - Securities Industry and Financial Markets Assn**

Mailing Address 1101 New York Avenue, Suite 800

City Washington State DC Zip Code 20005-4279

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : AF3B12A006ECA4BD1909**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**National Association Of Realtors PAC**

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 10 / 2015**

**Transaction ID : A0E8D6AF19A9F46DC9E0**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4472.44**

**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 119 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CONSUMER ELECTRONICS ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City State Zip Code  
Arlington VA 22202-3028

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : ACC3970DC44824867B2B**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American College of Radiology PAC**

Mailing Address 1891 Preston White Drive

City State Zip Code  
Reston VA 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : ADF903BBD8A9945A0921**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**BURNS AND MCDONNELL INC. PAC**

Mailing Address 9400 WARD PARKWAY

City State Zip Code  
Kansas City MO 64114-3319

FEC ID number of contributing federal political committee. **C** C00442913

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 03 / 2015

**Transaction ID : AFDF3BF2FA62E482B829**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

**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 120 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**National Association Of Realtors PAC**

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A377ED687FCB34FE2936**

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)**

Mailing Address 409 12th Street, SW

City Washington State DC Zip Code 20024-2125

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A7F8491C4DA6949E59C4**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GENENTECH INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1 DNA WAY

City South San Francisc State CA Zip Code 94080-4918

FEC ID number of contributing federal political committee. **C** C00199257

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : AB78F3F71711947E48CC**

Amount of Each Receipt this Period  
1000.00

**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 121 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**American Express Company PAC**

Mailing Address 801 Pennsylvania Avenue Nw, Suite

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C C00040535**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 30 / 2015**

**Transaction ID : AC5F4F99DDDF4EB191**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**TATE AND LYLE PAC OF TATE AND LYLE INGREDIENTS AMERICAS INC**

Mailing Address 2200 EAST ELDORADO STREET

City DECATUR State IL Zip Code 62521

FEC ID number of contributing federal political committee. **C C00056564**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : A1FB9B07A85F3402E83B**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMSTED INDUSTRIES INCORPORATED PAC (AMSTED PAC)**

Mailing Address TWO PRUDENTIAL PLAZA  
180 NORTH STETSON STREET STE 1800

City Chicago State IL Zip Code 60601-6808

FEC ID number of contributing federal political committee. **C C00438358**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 05 / 2015**

**Transaction ID : ACDD186031E494120BB3**

Amount of Each Receipt this Period  
**500.00**

**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 122 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

**A.** Mailing Address ONE STATE FARM PLAZA, D-2  
C/O MARK SCHWAMBERGER, TREASURER.

City State Zip Code  
Bloomington IL 61710-0001

FEC ID number of contributing federal political committee. **C** C00544817

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2015

**Transaction ID : AB1F0504E650F441DAF8**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**POLSINELLI PAC**

**B.** Mailing Address 900 W 48th Place, Ste 900

City State Zip Code  
Kansas City MO 64112-1899

FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 08 / 2015

**Transaction ID : A9306405EDDC3493E896**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**Mondelez International, Inc. PAC**

**C.** Mailing Address 975 F STREET, NW

City State Zip Code  
Washington DC 20004-1454

FEC ID number of contributing federal political committee. **C** C00529073

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 05 / 2015

**Transaction ID : A4241535BF6AE47D1AD0**

Amount of Each Receipt this Period  
4000.00

**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 123 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 220

City Washington State DC Zip Code 20004-2679

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 26 / 2015

**Transaction ID : AE1DF178AEA074CCD8A4**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ENCORE CAPITAL GROUP, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 3111 CAMINO DEL RIO NORTH  
SUITE 1300

City San Diego State CA Zip Code 92108-5750

FEC ID number of contributing federal political committee. **C** C00507392

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A881783C88F5642E5946**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bryan Cave LLP Political Fund**

Mailing Address 700 13th Street NW, Suite 500

City Washington State DC Zip Code 20005-3963

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A7A1F44FCD7284D47809**

Amount of Each Receipt this Period  
500.00

**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

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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**CISCO SYSTEMS, INC. FEDERAL PAC, AKA CISCO SYSTEMS EPAC**

Mailing Address 400 CAPITOL MALL, STE 1545  
 City Sacramento State CA Zip Code 95814-4434

FEC ID number of contributing federal political committee. **C C00362707**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 05 / 2015**

Transaction ID : **A3EC6AE581A774BB7860**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**American Wind Energy Association Windpac**

Mailing Address 1501 M Street, NW  
 10th Floor  
 City Washington State DC Zip Code 20005-1700

FEC ID number of contributing federal political committee. **C C00259572**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 21 / 2015**

Transaction ID : **AEFED141DC5344C74947**

Amount of Each Receipt this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**National Electrical Contractors Political Action Committee**

Mailing Address 3 Bethesda Metro Center  
 Suite 1100  
 City Bethesda State MD Zip Code 20814-6302

FEC ID number of contributing federal political committee. **C C00113811**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 07 / 2015**

Transaction ID : **A906CFEF867F449A7A37**

Amount of Each Receipt this Period  
**2000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **4000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Dla Piper Llp PAC**

Mailing Address 500 8th Street, NW

City Washington State DC Zip Code 20004-2131

FEC ID number of contributing federal political committee. **C C00151340**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : A1EDF5049E57F448D9EC**

Amount of Each Receipt this Period  
 750.00

**B.** Full Name (Last, First, Middle Initial)  
**MASON CONTRACTORS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE-MACPAC**

Mailing Address 1481 MERCHANT DRIVE

City Algonquin State IL Zip Code 60102-5917

FEC ID number of contributing federal political committee. **C C00291799**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : A371DC3C2DAE3434BA04**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation Political Action Committee**

Mailing Address 5959 Las Conlinas Blvd.

City Irving State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : A92555D22BCEF4D60AD0**

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  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alticor Political Action Committee Altipac**

Mailing Address 7575 E Fulton Road  
Attn: Scott Smoes 56-3S

City ADA State MI Zip Code 49355-0001

FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : A6D101F7C57A44FFF8CF**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Chicago Board Options Exchange PAC**

Mailing Address 400 S Lasalle Street

City Chicago State IL Zip Code 60605-1023

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 10 / 2015

**Transaction ID : A88262E15FCC848C9966**

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
**Wal-Mart Stores Inc. Pac For Responsible Government**

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : A966B732D221A492EB64**

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

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 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
National Federation Of Independent Business/Save Americas Free Ent Trust (NFIB Safe Trust)

Mailing Address 1201 F Street NW  
Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 01 / 2015

**Transaction ID : A32EEF6DB1FE04656B06**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Pinnacle West Capital Corporation PAC

Mailing Address 801 Pennsylvania Ave NW  
Suite 214

City Washington State DC Zip Code 20004-2680

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AEBC8342D785042E89A8**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
EVERSOURCE ENERGY POLITICAL ACTION COMMITTEE (EVERSOURCEPAC)

Mailing Address 901 F STREET NW  
SUITE 602

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : A1EF27E0FA9E14966979**

Amount of Each Receipt this Period  
1000.00

**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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS POLITICAL ACTION COMMITTEE

**A.** Mailing Address ONE NATIONWIDE PLAZA, 1-32-301

City State Zip Code  
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00406215

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 19 2015

**Transaction ID : A4CBC68D9C1A54139806**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**Republican Mainstreet Partnership PAC**

**B.** Mailing Address 1220 L Street NW  
Suite 100-263

City State Zip Code  
Washington DC 20005-4018

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 10 2015

**Transaction ID : A518B3014D0E74445BB0**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**Pinnacle West Capital Corporation PAC**

**C.** Mailing Address 801 Pennsylvania Ave NW  
Suite 214

City State Zip Code  
Washington DC 20004-2680

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 10 2015

**Transaction ID : ABA4C4CCAE072425FA77**

Amount of Each Receipt this Period  
1000.00

**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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EMPLOYEE--OWNED S CORPORATIONS OF AMERICA PAC (ESCA PAC)**

Mailing Address 805 15TH STREET NW SUITE 650

City Washington State DC Zip Code 20005-2281

FEC ID number of contributing federal political committee. **C** C00458257

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : A613BA3B42BD24FB985E**

Amount of Each Receipt this Period  
 4500.00

**B.** Full Name (Last, First, Middle Initial)  
**PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 751 Broad Street

City Newark State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : A7B8007D23BF54188898**

Amount of Each Receipt this Period  
 3500.00

**C.** Full Name (Last, First, Middle Initial)  
**Altria Group, Inc. Political Action Committee (Altriapac)**

Mailing Address 101 Constitution Ave NW Suite 400W

City Washington State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : A0A698D57DAE04FE5883**

Amount of Each Receipt this Period  
 1000.00

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

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

9000.00

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

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for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 31 / 2015

**Transaction ID : A96C63216B14549919C3**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 751 Broad Street

City State Zip Code  
Newark NJ 07102-3714

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 31 / 2015

**Transaction ID : AC693E0A40F184CBEB1F**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**General Motors Company PAC**

Mailing Address 25 Massachusetts Ave., NW  
Suite 400

City State Zip Code  
Washington DC 20001-1427

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 03 / 2015

**Transaction ID : A9507806E411F427D917**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

**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 131 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC)**

Mailing Address **2200 RESEARCH BOULEVARD**

City **Rockville** State **MD** Zip Code **20850-3289**

FEC ID number of contributing federal political committee. **C C00210666**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 21 / 2015**

**Transaction ID : A855EDCE4A1174634B9B**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AIRLINES FOR AMERICA (A4A) POLITICAL ACTION COMMITTEE**

Mailing Address **1301 PENNSYLVANIA AVENUE NW**

City **Washington** State **DC** Zip Code **20004-1701**

FEC ID number of contributing federal political committee. **C C00114694**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 05 / 2015**

**Transaction ID : A301CA871194546F792D**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**PAC Of The Aaos**

Mailing Address **317 Massachusette Avenue, NE**

City **Washington** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : A8E89D956155B4AA189F**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

**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 132 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**QUICKEN LOANS INC PAC**

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 620

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : AF5038F6D1A0E4C09A15**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dealers Election Action Committee of the National Automotive**

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 19 / 2015

**Transaction ID : A8D94EF2104834A1C9CD**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**MAKING AMERICA PROSPEROUS PAC**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C C00445379**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AF3B95C6BD3404678AD2**

Amount of Each Receipt this Period  
4000.00

**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 133 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DTE ENERGY CO. PAC - FEDERAL**

Mailing Address **ONE ENERGY PLAZA**  
**ROOM 1583 WCB**

City **Detroit** State **MI** Zip Code **48226-1221**

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : A4C12974D33BE493CAD**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. SOUTHERN MISSOURIAN IN THE HOUSE PAC**

Mailing Address **PO BOX 30844**

City **BETHESDA** State **MD** Zip Code **20824**

FEC ID number of contributing federal political committee. **C C00563726**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : ADA0BE76788CE45438F0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**National Stone, Sand & Gravel Association ROCKPAC**

Mailing Address **1605 King Street**

City **Alexandria** State **VA** Zip Code **22314-2726**

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : AAD929718090340809AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

**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: PAGE 134 OF 203  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Pfizer Inc. PAC**

Mailing Address 235 E 42nd Street

City State Zip Code  
New York NY 10017-5703

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : AA4B2B2C3858441A6A8C**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Fmr Llc PAC Fidelity Pac**

Mailing Address 82 Devonshire Street

City State Zip Code  
Boston MA 02109-3605

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : A6DA7385B63C74A7C9E5**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jp Morgan Chase PAC**

Mailing Address 601 Pennsylvania Ave NW 7th Floor

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C C00128512**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : A9478479312A14686AD4**

Amount of Each Receipt this Period  
1000.00

**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 135 OF 203
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Federal Express PAC**

Mailing Address 942 South Shady Grove Road  
1st Floor

City Memphis State TN Zip Code 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015

Transaction ID : **A2612259EB0734B079D7**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

212771.76

**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 136 OF 203			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

<b>A. Full Name (Last, First, Middle Initial)</b> DIAGEO NORTH AMERICA, INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 801 MAIN AVENUE		Amount of Each Disbursement this Period 349.32 <b>Transaction ID : BECC9B6A52AB14621942</b>
City NORWALK State CT Zip Code 06851	Purpose of Disbursement In-kind: Event Facility Rental	
Candidate Name DIAGEO NORTH AMERICA, INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE		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:		

<b>B. Full Name (Last, First, Middle Initial)</b> Stripe		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 692.75 <b>Transaction ID : B2EE802EC43804621819</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name		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:		

<b>C. Full Name (Last, First, Middle Initial)</b> IMG E LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 603 King St 4th Floor		Amount of Each Disbursement this Period 3450.00 <b>Transaction ID : B183706378619411E9A5</b>
City Alexandria State VA Zip Code 22314-3159	Purpose of Disbursement Media Consulting/Web Development	
Candidate Name		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4492.07
<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 137 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>	
Mailing Address <b>205 Pennsylvania Ave SE</b>			Amount of Each Disbursement this Period <b>126.50</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-1164</b>	Transaction ID : <b>BAEEE7F90238B42F8804</b>	
Purpose of Disbursement <b>CC Transaction Fees</b>		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:				

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2015</b>	
Mailing Address <b>3180 18th St Ste 100</b>			Amount of Each Disbursement this Period <b>2.28</b>	
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94110-2042</b>	Transaction ID : <b>BE201CD1A8C834186B90</b>	
Purpose of Disbursement <b>CC Transaction Fees</b>		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:				

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2015</b>	
Mailing Address <b>3180 18th St Ste 100</b>			Amount of Each Disbursement this Period <b>4.25</b>	
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94110-2042</b>	Transaction ID : <b>B195C98B26FD64BA6A86</b>	
Purpose of Disbursement <b>CC Transaction Fees</b>		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).....	<b>133.03</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 138 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Cannon Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address 1001 Pennsylvania Ave NW, Ste 1300		Amount of Each Disbursement this Period <b>4000.00</b> Transaction ID : <b>BF705E2895F0641BCAA3</b>
City Washington State DC Zip Code 20004-2505	Purpose of Disbursement Fundraising Consulting	
Candidate Name	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>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period <b>163.15</b> Transaction ID : <b>BB1DD5ABC0C6E464D95C</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>C. SCM Associates Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 06 / 2015</b>
Mailing Address PO Box 254		Amount of Each Disbursement this Period <b>1063.91</b> Transaction ID : <b>BC80F54AC1783438F840</b>
City Dublin State NH Zip Code 03444-0254	Purpose of Disbursement Direct Marketing	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5227.06</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 139 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 57.92 <b>Transaction ID : BBAE13DAD230E409D9D6</b>
City Deerfield	State IL	
Zip Code 60015-4401	Purpose of Disbursement Mileage Reimbursement	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:	

Full Name (Last, First, Middle Initial) <b>B. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 84.17 <b>Transaction ID : BCA8DB3A4E5344D22A96</b>
City Chicago	State IL	
Zip Code 60614-5077	Purpose of Disbursement Mileage Reimbursement	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:	

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 20.05 <b>Transaction ID : B58A71F52989A4816A11</b>
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	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).....	162.14
<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 140 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 2.50 <b>Transaction ID : BE990E918C2A346E896B</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement CC Transaction Fees		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: _____		

Full Name (Last, First, Middle Initial) <b>B. Victory Phones</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 190 Monroe Ave NW 5th FL			Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : B4CEDF8F020164373943</b>
City Grand Rapids	State MI	Zip Code 49503-2628	
Purpose of Disbursement Direct Marketing		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: _____		

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 79.30 <b>Transaction ID : B71737459A94A43C8B4C</b>
City San Francisco	State CA	Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		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).....	1881.80
<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 141 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>08</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		08		2015
M M	/	D D	/	Y Y Y Y									
10		08		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>42.38</td> </tr> </table>		42.38			
City	State	Zip Code											
San Francisco	CA	94110-2042											
42.38													
Purpose of Disbursement CC Transaction Fees		Transaction ID : <b>B8BF4B5217D854A86808</b>											
Candidate Name		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)		Date of Disbursement											
<b>B. ADP</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>09</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		09		2015
M M	/	D D	/	Y Y Y Y									
10		09		2015									
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Roseland</td> <td>NJ</td> <td>07068-1728</td> </tr> </table>		City	State	Zip Code	Roseland	NJ	07068-1728	<table border="1"> <tr> <td>58.29</td> </tr> </table>		58.29			
City	State	Zip Code											
Roseland	NJ	07068-1728											
58.29													
Purpose of Disbursement Payroll Fees		Transaction ID : <b>B15428DA1A3C14893B99</b>											
Candidate Name		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)		Date of Disbursement											
<b>c. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>11</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		11		2015
M M	/	D D	/	Y Y Y Y									
10		11		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>4.25</td> </tr> </table>		4.25			
City	State	Zip Code											
San Francisco	CA	94110-2042											
4.25													
Purpose of Disbursement CC Transaction Fees		Transaction ID : <b>BE2FFB3D4931B42F48B3</b>											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	104.92
<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 142 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 28.25 <b>Transaction ID : B9DC9C5A4D69D45288EB</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. James Slepian</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 2348 N Lister, #203		Amount of Each Disbursement this Period 2475.00 <b>Transaction ID : B673EF7CAD2DB46CA860</b>
City Chicago State IL Zip Code 60614-7352	Purpose of Disbursement Campaign Strategy	
Candidate Name	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>C. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2100.00 <b>Transaction ID : B47D807D21FBF4FFFA85</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4603.25
<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 143 OF 203		
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.94 <b>Transaction ID : B12C156204BD64ACBB78</b>
City Deerfield	State IL	
Zip Code 60015-4401	Purpose of Disbursement Salary	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:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 2660.94 <b>Transaction ID : BCB6CB5A316324F01802</b>
City Gurnee	State IL	
Zip Code 60031-1671	Purpose of Disbursement Salary	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:	

Full Name (Last, First, Middle Initial) <b>c. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 1006.95 <b>Transaction ID : B8BE392123B3940E6BBC</b>
City Chicago	State IL	
Zip Code 60614-5077	Purpose of Disbursement Salary	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).....	4699.83
<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 144 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2015</b>
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period <b>1516.25</b> Transaction ID : <b>BE186BF6FF7504218934</b>
City Glenview	State IL	
Purpose of Disbursement Salary		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: _____	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2015</b>
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period <b>189.12</b> Transaction ID : <b>B70038B582C5340DB887</b>
City Dallas	State TX	
Purpose of Disbursement Cell Phone Service		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: _____	

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2015</b>
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period <b>2732.49</b> Transaction ID : <b>B280EFF36DD5846C39BC</b>
City Roseland	State NJ	
Purpose of Disbursement Payroll Taxes		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).....	<b>4437.86</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 145 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. North Shore Printers, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 14 / 2015</b>		
Mailing Address 535 S Sheridan Rd			Amount of Each Disbursement this Period <b>1441.92</b>		
City Waukegan	State IL	Zip Code 60085-7538	Transaction ID : <b>B7D28CD36A7604D1585E</b>		
Purpose of Disbursement Printing and Postage		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:					

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2015</b>		
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period <b>76.86</b>		
City San Francisco	State CA	Zip Code 94110-2042	Transaction ID : <b>BACC9C7E35A694805A54</b>		
Purpose of Disbursement CC Transaction Fees		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:					

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2015</b>		
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period <b>197.50</b>		
City Washington	State DC	Zip Code 20003-1164	Transaction ID : <b>B37EE75733D3A4C3EBD5</b>		
Purpose of Disbursement CC Transaction Fees		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).....	<b>1716.28</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 146 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2015</b>
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period <b>105.43</b> Transaction ID : <b>B47F6D78DC85D4D3BA8B</b>
City Waukegan	State IL	
Zip Code 60085-7538	Purpose of Disbursement Printing	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:	

Full Name (Last, First, Middle Initial) <b>B. Electric Gum</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2015</b>
Mailing Address 4541 Ravenswood Ave, Ste 203B		Amount of Each Disbursement this Period <b>5950.00</b> Transaction ID : <b>B125B54933B714EC4B5F</b>
City Chicago	State IL	
Zip Code 60640-5275	Purpose of Disbursement Media Production	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:	

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2015</b>
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period <b>87.32</b> Transaction ID : <b>BEF13CC61953E4C63AE0</b>
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	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).....	<b>6142.75</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 147 OF 203			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>18</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		18		2015
M M	/	D D	/	Y Y Y Y									
10		18		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>2.28</td> </tr> </table>		2.28			
City	State	Zip Code											
San Francisco	CA	94110-2042											
2.28													
Purpose of Disbursement CC Transaction Fees		Transaction ID : <b>BB9936534358D42A5AB3</b>											
Candidate Name		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)		Date of Disbursement											
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>19</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		19		2015
M M	/	D D	/	Y Y Y Y									
10		19		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>0.70</td> </tr> </table>		0.70			
City	State	Zip Code											
San Francisco	CA	94110-2042											
0.70													
Purpose of Disbursement CC Transaction Fees		Transaction ID : <b>B119295EFD4994AEA8F4</b>											
Candidate Name		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)		Date of Disbursement											
<b>c. The Cannon Group</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>19</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		19		2015
M M	/	D D	/	Y Y Y Y									
10		19		2015									
Mailing Address 1001 Pennsylvania Ave NW, Ste 1300		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20004-2505</td> </tr> </table>		City	State	Zip Code	Washington	DC	20004-2505	<table border="1"> <tr> <td>6460.00</td> </tr> </table>		6460.00			
City	State	Zip Code											
Washington	DC	20004-2505											
6460.00													
Purpose of Disbursement Fundraising Consulting		Transaction ID : <b>BBCC1698BEADC4A17B18</b>											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6462.98
<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 148 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement																
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		20		2015						
M M	/	D D	/	Y Y Y Y														
10		20		2015														
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period																
City San Francisco	State CA	Zip Code 94110-2042																
Purpose of Disbursement CC Transaction Fees	<table border="1"> <tr> <td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> <tr> <td colspan="8" style="text-align: right;">20.05</td> </tr> </table>		4	3	2	1	0	.	0	0	20.05							
4	3	2	1	0	.	0	0											
20.05																		
Candidate Name	Transaction ID : <b>BB20DBF5DAC1D456FBB9</b>																	
Office Sought:	House <input type="checkbox"/>	Disbursement For:																
	Senate <input type="checkbox"/>	<input type="checkbox"/> Primary <input type="checkbox"/> General																
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)																
State:	District:	Category/Type																

Full Name (Last, First, Middle Initial)		Date of Disbursement																
<b>B. Strategic Advance Services, LLC</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		20		2015						
M M	/	D D	/	Y Y Y Y														
10		20		2015														
Mailing Address 611 Pennsylvania Ave SE, #267		Amount of Each Disbursement this Period																
City Washington	State DC	Zip Code 20003-4303																
Purpose of Disbursement Event Travel	<table border="1"> <tr> <td>4</td><td>0</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> <tr> <td colspan="8" style="text-align: right;">4000.00</td> </tr> </table>		4	0	0	0	0	.	0	0	4000.00							
4	0	0	0	0	.	0	0											
4000.00																		
Candidate Name	Transaction ID : <b>B7C5D787AB9DC43FB8A6</b>																	
Office Sought:	House <input type="checkbox"/>	Disbursement For:																
	Senate <input type="checkbox"/>	<input type="checkbox"/> Primary <input type="checkbox"/> General																
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)																
State:	District:	Category/Type																

Full Name (Last, First, Middle Initial)		Date of Disbursement																
<b>C. Aristotle International</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		20		2015						
M M	/	D D	/	Y Y Y Y														
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Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period																
City Washington	State DC	Zip Code 20003-1164																
Purpose of Disbursement CC Transaction Fees	<table border="1"> <tr> <td>4</td><td>0</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> <tr> <td colspan="8" style="text-align: right;">50.00</td> </tr> </table>		4	0	0	0	0	.	0	0	50.00							
4	0	0	0	0	.	0	0											
50.00																		
Candidate Name	Transaction ID : <b>BE8B4634091134562970</b>																	
Office Sought:	House <input type="checkbox"/>	Disbursement For:																
	Senate <input type="checkbox"/>	<input type="checkbox"/> Primary <input type="checkbox"/> General																
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)																
State:	District:	Category/Type																

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>4</td><td>0</td><td>7</td><td>0</td><td>5</td><td>.</td><td>0</td><td>0</td> </tr> <tr> <td colspan="8" style="text-align: right;">4070.05</td> </tr> </table>	4	0	7	0	5	.	0	0	4070.05							
4	0	7	0	5	.	0	0										
4070.05																	
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td>4</td><td>0</td><td>7</td><td>0</td><td>5</td><td>.</td><td>0</td><td>0</td> </tr> </table>	4	0	7	0	5	.	0	0								
4	0	7	0	5	.	0	0										

**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 149 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement																									
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		21		2015														
M M	/	D D	/	Y Y Y Y																							
10		21		2015																							
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period																									
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>11</td> <td>22</td> <td>33</td> <td>44</td> <td>55</td> <td>66</td> <td>77</td> <td>88</td> <td>99</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>20.75</td> </tr> </table>		11	22	33	44	55	66	77	88	99									20.75
City	State	Zip Code																									
San Francisco	CA	94110-2042																									
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Purpose of Disbursement CC Transaction Fees		Transaction ID : B94413794006B4F83A2F																									
Candidate Name		Category/Type																									
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)												
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Full Name (Last, First, Middle Initial)		Date of Disbursement																									
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>22</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		22		2015														
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City	State	Zip Code																									
San Francisco	CA	94110-2042																									
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Purpose of Disbursement CC Transaction Fees		Transaction ID : B810C30442E2143F5A37																									
Candidate Name		Category/Type																									
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)												
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Full Name (Last, First, Middle Initial)		Date of Disbursement																									
<b>C. ADP</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>23</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		23		2015														
M M	/	D D	/	Y Y Y Y																							
10		23		2015																							
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period																									
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Roseland</td> <td>NJ</td> <td>07068-1728</td> </tr> </table>		City	State	Zip Code	Roseland	NJ	07068-1728	<table border="1"> <tr> <td>11</td> <td>22</td> <td>33</td> <td>44</td> <td>55</td> <td>66</td> <td>77</td> <td>88</td> <td>99</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>58.29</td> </tr> </table>		11	22	33	44	55	66	77	88	99									58.29
City	State	Zip Code																									
Roseland	NJ	07068-1728																									
11	22	33	44	55	66	77	88	99																			
								58.29																			
Purpose of Disbursement Payroll Fees		Transaction ID : B7B42D95A8F0445739F3																									
Candidate Name		Category/Type																									
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)												
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<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>11</td> <td>22</td> <td>33</td> <td>44</td> <td>55</td> <td>66</td> <td>77</td> <td>88</td> <td>99</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>118.84</td> </tr> </table>	11	22	33	44	55	66	77	88	99									118.84
11	22	33	44	55	66	77	88	99											
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<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td>11</td> <td>22</td> <td>33</td> <td>44</td> <td>55</td> <td>66</td> <td>77</td> <td>88</td> <td>99</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	11	22	33	44	55	66	77	88	99									
11	22	33	44	55	66	77	88	99											

# 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 150 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LAKE COUNTY REPUBLICAN CENTRAL COMMITTEE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2015</b>
Mailing Address <b>320 PETERSON RD</b>			Amount of Each Disbursement this Period <b>250.00</b> Transaction ID : <b>B8EEAED47A4624E55B72</b>
City <b>Libertyville</b>	State <b>IL</b>	Zip Code <b>60048-1008</b>	
Purpose of Disbursement <b>Event Sponsorship</b>		Candidate Name	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>B. The Cannon Group</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2015</b>
Mailing Address <b>1001 Pennsylvania Ave NW, Ste 1300</b>			Amount of Each Disbursement this Period <b>12017.47</b> Transaction ID : <b>B32A49874AD1F4DEBA9A</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004-2505</b>	
Purpose of Disbursement <b>Fundraising Consulting</b>		Candidate Name	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>c. Hilltop, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2015</b>
Mailing Address <b>1590 S Milwaukee Ave</b>			Amount of Each Disbursement this Period <b>1138.04</b> Transaction ID : <b>B29A404BB6A024F40A74</b>
City <b>Libertyville</b>	State <b>IL</b>	Zip Code <b>60048-3793</b>	
Purpose of Disbursement <b>Office Rent</b>		Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>13405.51</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 151 OF 203		
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 213.60 <b>Transaction ID : B77B44C2FEBDA431DA18</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 1516.25 <b>Transaction ID : BEB401FD2E9E246278CE</b>
City Glenview State IL Zip Code 60026-1179	Purpose of Disbursement Salary	
Candidate Name	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>C. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.95 <b>Transaction ID : B8904BC3FA4084EBAAF0</b>
City Deerfield State IL Zip Code 60015-4401	Purpose of Disbursement Salary	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2761.80
<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 152 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph Shapiro</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015		
Mailing Address 1818 N Halsted St, #405			Amount of Each Disbursement this Period 1006.94		
City Chicago	State IL	Zip Code 60614-5077	Transaction ID : <b>BB34029A5DAA340D38C4</b>		
Purpose of Disbursement Salary		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:					

Full Name (Last, First, Middle Initial) <b>B. Ms. Sara Karlovics</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015		
Mailing Address 17601 W Mill Creek Crossing Dr			Amount of Each Disbursement this Period 1834.25		
City Gurnee	State IL	Zip Code 60031-1671	Transaction ID : <b>B240BEA677ACC4F38B47</b>		
Purpose of Disbursement Salary		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:					

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015		
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 185.00		
City Washington	State DC	Zip Code 20003-1164	Transaction ID : <b>BDAC20D455A6C4C1ABC5</b>		
Purpose of Disbursement CC Transaction Fees		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).....	3026.19
<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 153 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period 2159.88 <b>Transaction ID : B08E0EEB60984473D970</b>
City Roseland State NJ Zip Code 07068-1728	Purpose of Disbursement Payroll Taxes	
Candidate Name	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>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 4.56 <b>Transaction ID : B49A6F8292B7D4BD89EC</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>C. Professional Data Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 824 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 1507.76 <b>Transaction ID : B13CF57B742234446B73</b>
City Athens State GA Zip Code 30605-1332	Purpose of Disbursement Compliance Consulting	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3672.20
<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 154 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period 58.29
City Roseland	State NJ	
Zip Code 07068-1728	Purpose of Disbursement Payroll Fees	<b>Transaction ID : BF39467747FDD488290F</b>
Candidate Name	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>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 62.13
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	<b>Transaction ID : B53E1AD9886194BC1966</b>
Candidate Name	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>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 16.40
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	<b>Transaction ID : B7C18CD73DB9C45E0A3D</b>
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.82
<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 155 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Cannon Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 1001 Pennsylvania Ave NW, Ste 1300		Amount of Each Disbursement this Period 13633.15 <b>Transaction ID : B0D720E64083F4902A6B</b>
City Washington State DC Zip Code 20004-2505	Purpose of Disbursement Fundraising Consulting	
Candidate Name	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>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 87.50 <b>Transaction ID : BE3DF783663934DFD859</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>C. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period 709.45 <b>Transaction ID : B52C1591DE63D442ABD2</b>
City Waukegan State IL Zip Code 60085-7538	Purpose of Disbursement Printing	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14430.10
<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 156 OF 203			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. North Shore Printers, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 535 S Sheridan Rd			Amount of Each Disbursement this Period 885.79 <b>Transaction ID : B67901F4B21444127B9B</b>
City Waukegan	State IL	Zip Code 60085-7538	
Purpose of Disbursement Printing		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: _____		

Full Name (Last, First, Middle Initial) <b>B. James Slepian</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 2348 N Lister, #203			Amount of Each Disbursement this Period 2475.00 <b>Transaction ID : B1B31B7B6CB834847B2B</b>
City Chicago	State IL	Zip Code 60614-7352	
Purpose of Disbursement Campaign Strategy		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: _____		

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 134.60 <b>Transaction ID : BB6782B803AAA45E9921</b>
City San Francisco	State CA	Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		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) .....	3495.39
<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 157 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. IMG E LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2015
Mailing Address 603 King St 4th Floor		Amount of Each Disbursement this Period 10350.00 <b>Transaction ID : B4BF8B226FC2E40CFA2D</b>
City Alexandria	State VA Zip Code 22314-3159	
Purpose of Disbursement Media Consulting/Web Development		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:		

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 233.65 <b>Transaction ID : BFE41402F84964A9C93A</b>
City San Francisco	State CA Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		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:		

Full Name (Last, First, Middle Initial) <b>C. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.94 <b>Transaction ID : BD4A00D2C152C49DE966</b>
City Deerfield	State IL Zip Code 60015-4401	
Purpose of Disbursement Salary		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).....	11615.94
<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 158 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period 11 12 2015 2159.88
City Roseland	State NJ	
Zip Code 07068-1728	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : B2E8B72C638D54ADFA95</b>
Candidate Name	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>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 11 12 2015 135.00
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement CC Transaction Fees	<b>Transaction ID : B8DD5280FF5A14836AE1</b>
Candidate Name	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>c. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 11 12 2015 1834.25
City Gurnee	State IL	
Zip Code 60031-1671	Purpose of Disbursement Salary	<b>Transaction ID : B264AEF3761A4438DBC7</b>
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4129.13
<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 159 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 1006.95 <b>Transaction ID : BA6FE044835BB47FE87C</b>
City Chicago State IL Zip Code 60614-5077	Purpose of Disbursement Salary	
Candidate Name	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>B. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 1516.25 <b>Transaction ID : B7827812225774640AD5</b>
City Glenview State IL Zip Code 60026-1179	Purpose of Disbursement Salary	
Candidate Name	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>c. Campaign Ops Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 372 W Ontario, Ste 400		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BD25F760288744E8B974</b>
City Chicago State IL Zip Code 60654-6931	Purpose of Disbursement Digital Advertising	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3523.20
<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 160 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1 Adp Blvd			Amount of Each Disbursement this Period 58.29 <b>Transaction ID : B4ED200057F4447D3AC1</b>
City Roseland	State NJ	Zip Code 07068-1728	
Purpose of Disbursement Payroll Fees		Candidate Name	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>B. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 208 S Akard St			Amount of Each Disbursement this Period 185.55 <b>Transaction ID : B19DD55F26D404F668BC</b>
City Dallas	State TX	Zip Code 75202-4295	
Purpose of Disbursement Cell Phone Service		Candidate Name	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>c. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2015
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 39.80 <b>Transaction ID : BA53D032BE8C44675801</b>
City San Francisco	State CA	Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	283.64
<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 161 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		17		2015
M M	/	D D	/	Y Y Y Y									
11		17		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>39.80</td> </tr> </table>		39.80			
City	State	Zip Code											
San Francisco	CA	94110-2042											
39.80													
Purpose of Disbursement CC Transaction Fees		Transaction ID : B3CE88A666D6E4D77879											
Candidate Name		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)		Date of Disbursement											
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>18</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		18		2015
M M	/	D D	/	Y Y Y Y									
11		18		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>0.70</td> </tr> </table>		0.70			
City	State	Zip Code											
San Francisco	CA	94110-2042											
0.70													
Purpose of Disbursement CC Transaction Fees		Transaction ID : BA63895AF4DF1468C8C8											
Candidate Name		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)		Date of Disbursement											
<b>C. Chicago Jewish Star</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		20		2015
M M	/	D D	/	Y Y Y Y									
11		20		2015									
Mailing Address PO Box 268		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Skokie</td> <td>IL</td> <td>60076-0268</td> </tr> </table>		City	State	Zip Code	Skokie	IL	60076-0268	<table border="1"> <tr> <td>189.00</td> </tr> </table>		189.00			
City	State	Zip Code											
Skokie	IL	60076-0268											
189.00													
Purpose of Disbursement Advertising		Transaction ID : B96969671943D44F189A											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	229.50
<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 162 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015		
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 267.50		
City Washington	State DC	Zip Code 20003-1164	Transaction ID : B1496F8D21EC248E3A69		
Purpose of Disbursement CC Transaction Fees		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:					

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2015		
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 2.28		
City San Francisco	State CA	Zip Code 94110-2042	Transaction ID : B2AF9E8FF9A3B42D799E		
Purpose of Disbursement CC Transaction Fees		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:					

Full Name (Last, First, Middle Initial) <b>C. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015		
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 50.00		
City Washington	State DC	Zip Code 20003-1164	Transaction ID : B95D47054922F45DA9E4		
Purpose of Disbursement CC Transaction Fees		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).....	319.78
<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 163 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Danielle R. Dold</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 500 Park Dr			Amount of Each Disbursement this Period 103.65 <b>Transaction ID : B3BE3B21DA82F4333A75</b>
City Kenilworth	State IL	Zip Code 60043-1005	
Purpose of Disbursement Reimburse Travel Expense-No Itemization		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: _____		

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 198.10 <b>Transaction ID : BB8F9E68E434C4D10AD6</b>
City San Francisco	State CA	Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		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: _____		

Full Name (Last, First, Middle Initial) <b>c. Campaign Ops Group</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 372 W Ontario, Ste 400			Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : B964E9B3E0C144F95AE1</b>
City Chicago	State IL	Zip Code 60654-6931	
Purpose of Disbursement Digital Advertising		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).....	10301.75
<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 164 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 640.50 <b>Transaction ID : B8E80DD5C7FEA4B03881</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 213.60 <b>Transaction ID : B28615D8521EC4BE184E</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>c. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.95 <b>Transaction ID : BA517CC0C3C0841AEB C1</b>
City Deerfield State IL Zip Code 60015-4401	Purpose of Disbursement Salary	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1886.05
<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 165 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 1006.94 <b>Transaction ID : BE7268456BFF048C092C</b>
City Chicago State IL Zip Code 60614-5077	Purpose of Disbursement Salary	
Candidate Name	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>B. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 1834.25 <b>Transaction ID : BCD63270AFCF1416993E</b>
City Gurnee State IL Zip Code 60031-1671	Purpose of Disbursement Salary	
Candidate Name	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>C. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 1516.25 <b>Transaction ID : BA51E04266DF34F70A95</b>
City Glenview State IL Zip Code 60026-1179	Purpose of Disbursement Salary	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4357.44
<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 166 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period 2155.53 <b>Transaction ID : B5D7419586E774ECDA72</b>
City Roseland	State NJ Zip Code 07068-1728	
Purpose of Disbursement Payroll Taxes	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:		

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 41.01 <b>Transaction ID : B1776F65B59D5407F8B3</b>
City San Francisco	State CA Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees	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:		

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 85.41 <b>Transaction ID : B38FA317980374B36AC8</b>
City San Francisco	State CA Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees	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).....	2281.95
<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 167 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 270.00 <b>Transaction ID : BEE52E3F026A64DDCA71</b>
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement CC Transaction Fees		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:			

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 824 S Milledge Ave Ste 101			Amount of Each Disbursement this Period 1567.01 <b>Transaction ID : BA13626FFC9354D47BF4</b>
City Athens	State GA	Zip Code 30605-1332	
Purpose of Disbursement Compliance Consulting		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:			

Full Name (Last, First, Middle Initial) <b>c. Hilltop, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1590 S Milwaukee Ave			Amount of Each Disbursement this Period 1138.04 <b>Transaction ID : B44818F31DB154C96835</b>
City Libertyville	State IL	Zip Code 60048-3793	
Purpose of Disbursement Office Rent		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).....	2975.05
<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 168 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Smedbo, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1001 Sherwood Dr		Amount of Each Disbursement this Period 23400.00 <b>Transaction ID : B4529D2CC3EDE43B5B83</b>
City Lake Bluff	State IL	
Zip Code 60044-2239	Purpose of Disbursement Office Rent	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:	

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 160.32 <b>Transaction ID : BAB3CD7E80C80406F96C</b>
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	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:	

Full Name (Last, First, Middle Initial) <b>c. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 138.46 <b>Transaction ID : BCE9BBBFD529640DCB6D</b>
City Chicago	State IL	
Zip Code 60614-5077	Purpose of Disbursement Mileage Reimbursement	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).....	23698.78
<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 169 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 99.35 <b>Transaction ID : B058672A4B5234A35AA4</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. The Congressional Institute</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 1700 Diagonal Rd Ste 730		Amount of Each Disbursement this Period 853.00 <b>Transaction ID : BE827C345B23F4F2DB72</b>
City Alexandria State VA Zip Code 22314-2843	Purpose of Disbursement Conference Fee	
Candidate Name	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>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 237.60 <b>Transaction ID : B880442692F5A4EC680A</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1189.95
<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 170 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1 Adp Blvd			Amount of Each Disbursement this Period 58.29 <b>Transaction ID : B1CA0A6439B47490EAB0</b>
City Roseland	State NJ	Zip Code 07068-1728	
Purpose of Disbursement Payroll Fees		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:			

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 8.20 <b>Transaction ID : B6B080A518FF04B4EB13</b>
City San Francisco	State CA	Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees		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:			

Full Name (Last, First, Middle Initial) <b>c. The Cannon Group</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 1001 Pennsylvania Ave NW, Ste 1300			Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : B80FE64F0F90F41CEA0B</b>
City Washington	State DC	Zip Code 20004-2505	
Purpose of Disbursement Fundraising Consulting		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).....	4066.49
<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 171 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>07</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		07		2015
M M	/	D D	/	Y Y Y Y									
12		07		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>506.20</td> </tr> </table>		506.20			
City	State	Zip Code											
San Francisco	CA	94110-2042											
506.20													
Purpose of Disbursement CC Transaction Fees		Transaction ID : B87AF916381744AA1A0B											
Candidate Name		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)		Date of Disbursement											
<b>B. Member Lunch Fund</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>08</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		08		2015
M M	/	D D	/	Y Y Y Y									
12		08		2015									
Mailing Address 1102 Longworth House Office Bldg		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20515-0001</td> </tr> </table>		City	State	Zip Code	Washington	DC	20515-0001	<table border="1"> <tr> <td>700.00</td> </tr> </table>		700.00			
City	State	Zip Code											
Washington	DC	20515-0001											
700.00													
Purpose of Disbursement Membership Dues		Transaction ID : BB3A6228F592F4D3388F											
Candidate Name		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)		Date of Disbursement											
<b>C. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>08</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		08		2015
M M	/	D D	/	Y Y Y Y									
12		08		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>237.90</td> </tr> </table>		237.90			
City	State	Zip Code											
San Francisco	CA	94110-2042											
237.90													
Purpose of Disbursement CC Transaction Fees		Transaction ID : B23761A689F1B44C8B93											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1444.10
<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 172 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lake County Republican Federation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 320 Peterson Rd		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : B41D04F2C6BFD4FE28A8</b>
City Libertyville	State IL	
Zip Code 60048-1008	Purpose of Disbursement Event Tickets	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:	

Full Name (Last, First, Middle Initial) <b>B. James Slepian</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 2348 N Lister, #203		Amount of Each Disbursement this Period 3450.00 <b>Transaction ID : B6E864C7644C74E9F9F1</b>
City Chicago	State IL	
Zip Code 60614-7352	Purpose of Disbursement Campaign Strategy	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:	

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 20.05 <b>Transaction ID : BBCCD1AF99AEE49E5856</b>
City San Francisco	State CA	
Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	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).....	3545.05
<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 173 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015	
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 326.00	
City Washington	State DC	Zip Code 20003-1164	Transaction ID : <b>BA39EFBDBD44E44C8B8D</b>	
Purpose of Disbursement CC Transaction Fees		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:				

Full Name (Last, First, Middle Initial) <b>B. Stripe</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015	
Mailing Address 3180 18th St Ste 100			Amount of Each Disbursement this Period 20.05	
City San Francisco	State CA	Zip Code 94110-2042	Transaction ID : <b>B1DBC45E86B9440F3BD1</b>	
Purpose of Disbursement CC Transaction Fees		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:				

Full Name (Last, First, Middle Initial) <b>C. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015	
Mailing Address 1 Adp Blvd			Amount of Each Disbursement this Period 2148.65	
City Roseland	State NJ	Zip Code 07068-1728	Transaction ID : <b>B00FC6863064E4D33A7E</b>	
Purpose of Disbursement Payroll Taxes		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).....	2494.70
<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 174 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 1834.25 <b>Transaction ID : B54BDE884A7CA4685887</b>
City Gurnee State IL Zip Code 60031-1671	Purpose of Disbursement Salary	
Candidate Name	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>B. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 1006.95 <b>Transaction ID : BBE1C5B627AD04874870</b>
City Chicago State IL Zip Code 60614-5077	Purpose of Disbursement Salary	
Candidate Name	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>C. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.94 <b>Transaction ID : B1BE777E797944993814</b>
City Deerfield State IL Zip Code 60015-4401	Purpose of Disbursement Salary	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3873.14
<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 175 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 1516.25 <b>Transaction ID : BA9965D266E104E04917</b>
City Glenview	State IL	
Purpose of Disbursement Salary	Candidate Name	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>B. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 39.80 <b>Transaction ID : B14F437524AB94E65BBB</b>
City San Francisco	State CA	
Purpose of Disbursement CC Transaction Fees	Candidate Name	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>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 185.57 <b>Transaction ID : B7563ABCA6F9742DE875</b>
City Dallas	State TX	
Purpose of Disbursement Telephone	Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1741.62
<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 176 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		17		2015
M M	/	D D	/	Y Y Y Y									
12		17		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>1.09</td> </tr> </table>		1.09			
City	State	Zip Code											
San Francisco	CA	94110-2042											
1.09													
Purpose of Disbursement CC Transaction Fees		Transaction ID : B0FDAD4CC39CD4DEA9BF											
Candidate Name		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)		Date of Disbursement											
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>18</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		18		2015
M M	/	D D	/	Y Y Y Y									
12		18		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>0.70</td> </tr> </table>		0.70			
City	State	Zip Code											
San Francisco	CA	94110-2042											
0.70													
Purpose of Disbursement CC Transaction Fees		Transaction ID : BD58053FB1C934DB3852											
Candidate Name		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)		Date of Disbursement											
<b>C. ADP</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>18</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		18		2015
M M	/	D D	/	Y Y Y Y									
12		18		2015									
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Roseland</td> <td>NJ</td> <td>07068-1728</td> </tr> </table>		City	State	Zip Code	Roseland	NJ	07068-1728	<table border="1"> <tr> <td>58.29</td> </tr> </table>		58.29			
City	State	Zip Code											
Roseland	NJ	07068-1728											
58.29													
Purpose of Disbursement Payroll Fees		Transaction ID : B78B0631D766C48A4BD8											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.08
<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 177 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 79.30 <b>Transaction ID : B7A8AD4513EAA4903804</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period 5306.15 <b>Transaction ID : BEE8603B7C7154CC1AAD</b>
City Waukegan State IL Zip Code 60085-7538	Purpose of Disbursement Printing and Postage	
Candidate Name	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>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 427.82 <b>Transaction ID : B8B74028AE039480B8A3</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5813.27
<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 178 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>23</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		23		2015
M M	/	D D	/	Y Y Y Y									
12		23		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>39.80</td> </tr> </table>		39.80			
City	State	Zip Code											
San Francisco	CA	94110-2042											
39.80													
Purpose of Disbursement CC Transaction Fees		Transaction ID : B721D76CB03B84EE78A7											
Candidate Name		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)		Date of Disbursement											
<b>B. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		24		2015
M M	/	D D	/	Y Y Y Y									
12		24		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>8.20</td> </tr> </table>		8.20			
City	State	Zip Code											
San Francisco	CA	94110-2042											
8.20													
Purpose of Disbursement CC Transaction Fees		Transaction ID : BBDB0274ED42947E984A											
Candidate Name		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)		Date of Disbursement											
<b>C. Stripe</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>28</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		28		2015
M M	/	D D	/	Y Y Y Y									
12		28		2015									
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2042</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2042	<table border="1"> <tr> <td>325.43</td> </tr> </table>		325.43			
City	State	Zip Code											
San Francisco	CA	94110-2042											
325.43													
Purpose of Disbursement CC Transaction Fees		Transaction ID : BDDC63BBEAD3D4BC3A87											
Candidate Name		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:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	373.43
<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 179 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 23.03 <b>Transaction ID : B6293A30F444B40B0A7F</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. Professional Data Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 824 S Milledge Ave Ste 101		Amount of Each Disbursement this Period 1555.26 <b>Transaction ID : BB3DEA20383CE415D8D0</b>
City Athens State GA Zip Code 30605-1332	Purpose of Disbursement Compliance Consulting	
Candidate Name	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>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 819.19 <b>Transaction ID : B43B77E7CDDCB485FA03</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2397.48
<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 180 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 1031.95 <b>Transaction ID : B01E65A7AC9E1471CBF0</b>
City Deerfield	State IL	
Zip Code 60015-4401	Purpose of Disbursement Salary	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:	

Full Name (Last, First, Middle Initial) <b>B. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 1516.25 <b>Transaction ID : B6F942D7011A44986AE6</b>
City Glenview	State IL	
Zip Code 60026-1179	Purpose of Disbursement Salary	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:	

Full Name (Last, First, Middle Initial) <b>c. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 1834.25 <b>Transaction ID : BB6360C8021C24C8396A</b>
City Gurnee	State IL	
Zip Code 60031-1671	Purpose of Disbursement Salary	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).....	4382.45
<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 181 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 1006.94 <b>Transaction ID : BC75A62F1EF8149AA833</b>
City Chicago	State IL Zip Code 60614-5077	
Purpose of Disbursement Salary	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:		

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 1 Adp Blvd		Amount of Each Disbursement this Period 2146.12 <b>Transaction ID : B867AFDA4062E47EAB32</b>
City Roseland	State NJ Zip Code 07068-1728	
Purpose of Disbursement Payroll Taxes	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:		

Full Name (Last, First, Middle Initial) <b>c. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 306.16 <b>Transaction ID : B4F4BC10C711A470B8C4</b>
City San Francisco	State CA Zip Code 94110-2042	
Purpose of Disbursement CC Transaction Fees	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).....	3459.22
<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 182 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Stripe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 3180 18th St Ste 100		Amount of Each Disbursement this Period 1090.77 <b>Transaction ID : BC13710B55DF04F33832</b>
City San Francisco State CA Zip Code 94110-2042	Purpose of Disbursement CC Transaction Fees	
Candidate Name	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>B. Mrs. Goldie W. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 485 E Half Day Rd Ste 200		Amount of Each Disbursement this Period 15825.21 <b>Transaction ID : B3845C85BF3304C5B84A</b>
City Buffalo Grove State IL Zip Code 60089-8806	Purpose of Disbursement See Memo Entry	
Candidate Name	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>C. J&amp;L CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 1229 N North Branch St		Amount of Each Disbursement this Period 15825.21 <b>Transaction ID : BF294A5995ED54C6184B</b>
City Chicago State IL Zip Code 60642-2473	Purpose of Disbursement Event Catering	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16915.98
<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 183 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 158.99 <b>Transaction ID : B2875D8D8374B4025BFA</b>
City Chicago	State IL Zip Code 60614-5077	
Purpose of Disbursement See Memo Entries		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:		

Full Name (Last, First, Middle Initial) <b>B. Joseph Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1818 N Halsted St, #405		Amount of Each Disbursement this Period 124.31 <b>Transaction ID : B78A04B3A6FE341899DA</b> <b>[MEMO ITEM]</b>
City Chicago	State IL Zip Code 60614-5077	
Purpose of Disbursement Mileage Reimbursement		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:		

Full Name (Last, First, Middle Initial) <b>c. North Shore Community Bank &amp; Trust Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 576 Lincoln Ave		Amount of Each Disbursement this Period 2580.46 <b>Transaction ID : B3AA2B94104ED4A749C5</b>
City Winnetka	State IL Zip Code 60093-2308	
Purpose of Disbursement See Memo Entries		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).....	2739.45
<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 184 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Benchmark Email</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address 10532 Los Vaqueros Cir		Amount of Each Disbursement this Period <b>235.95</b>
City Los Alamitos State CA Zip Code 90720-2525	Purpose of Disbursement E-Marketing	
Candidate Name		Transaction ID : <b>BF0C4FC6520DC4F88B2E</b>
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:	Category/Type	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address 458 Lenfant Plz SW		Amount of Each Disbursement this Period <b>49.00</b>
City Washington State DC Zip Code 20024-2114	Purpose of Disbursement Postage	
Candidate Name		Transaction ID : <b>B6873A31E24CE44B2A47</b>
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:	Category/Type	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. Pinstripes</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address 1150 Willow Rd		Amount of Each Disbursement this Period <b>777.11</b>
City Northbrook State IL Zip Code 60062-6819	Purpose of Disbursement Event Catering	
Candidate Name		Transaction ID : <b>B2A4DC9E0C4A84453A89</b>
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:	Category/Type	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</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 185 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address First Street SE			Amount of Each Disbursement this Period 338.46
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Meeting Expense		Category/ Type	<b>Transaction ID : B4E6025C1EF2546009C0</b>  <b>[MEMO ITEM]</b>
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: _____		

Full Name (Last, First, Middle Initial) <b>B. Amazon.Com</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1200 12th Ave S Ste 1200			Amount of Each Disbursement this Period 268.11
City Seattle	State WA	Zip Code 98144-2734	
Purpose of Disbursement Office Supplies		Category/ Type	<b>Transaction ID : BB9705D1E3C9C441B831</b>  <b>[MEMO ITEM]</b>
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: _____		

Full Name (Last, First, Middle Initial) <b>c. Public Storage</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1950 Kelley Court			Amount of Each Disbursement this Period 127.00
City Libertyville	State IL	Zip Code 60048-9639	
Purpose of Disbursement Storage Facility Rental		Category/ Type	<b>Transaction ID : B4FA3EF79C0494ECE808</b>  <b>[MEMO ITEM]</b>
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).....	0.00
<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 186 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TruConnect Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address PO Box 79051		Amount of Each Disbursement this Period 220.00
City Phoenix	State AZ	
Zip Code 85062-9051		Transaction ID : <b>B8132B6727A204599B55</b>
Purpose of Disbursement Telephone	Category/ Type	
Candidate Name		<b>[MEMO ITEM]</b>
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>B. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 37.24
City Deerfield	State IL	
Zip Code 60015-4401		Transaction ID : <b>BA9EBFEDAF6474302B46</b>
Purpose of Disbursement See Memo Entries	Category/ Type	
Candidate Name		<b>[MEMO ITEM]</b>
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>C. Katherine J. Plonsker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 423 Brierhill Rd		Amount of Each Disbursement this Period 20.09
City Deerfield	State IL	
Zip Code 60015-4401		Transaction ID : <b>B7AD222CE73A74372939</b>
Purpose of Disbursement Mileage Reimbursement	Category/ Type	
Candidate Name		<b>[MEMO ITEM]</b>
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).....	37.24
<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 187 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. North Shore Community Bank &amp; Trust Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 576 Lincoln Ave		Amount of Each Disbursement this Period 4735.82 <b>Transaction ID : BD27B6450D00D46689BE</b>
City Winnetka	State IL	
Zip Code 60093-2308	Purpose of Disbursement See Memo Entries	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:	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 397.10 <b>Transaction ID : B47438425A92B4C3DAC7</b> <b>[MEMO ITEM]</b>
City Dfw Airport	State TX	
Zip Code 75261-9616	Purpose of Disbursement Airfare	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:	

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 77 W Wacker Dr		Amount of Each Disbursement this Period 1556.50 <b>Transaction ID : B97000A6E2B08487894E</b> <b>[MEMO ITEM]</b>
City Chicago	State IL	
Zip Code 60601-1604	Purpose of Disbursement Airfare	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).....	4735.82
<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 188 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ristorante Tosca</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1112 F St NW		Amount of Each Disbursement this Period 200.71
City Washington	State DC	
Zip Code 20004-1308		Transaction ID : B962B4AB91B334B1E855
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. NationBuilder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 448 S Hill St, Ste 200		Amount of Each Disbursement this Period 87.00
City Los Angeles	State CA	
Zip Code 90013-1155		Transaction ID : BD5843C61E4EF4AF38A3
Purpose of Disbursement Software	Category/Type	
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Public Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1950 Kelley Court		Amount of Each Disbursement this Period 127.00
City Libertyville	State IL	
Zip Code 60048-9639		Transaction ID : BAB8E13D1266142E2A18
Purpose of Disbursement Storage Facility Rental	Category/Type	
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 189 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dr. Don's Buttons</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 3906 W Morrow Dr		Amount of Each Disbursement this Period 419.99
City Glendale	State AZ	
Zip Code 85308-7531	Purpose of Disbursement Promotional Items: Buttons	Transaction ID : <b>B40485881C8B5447081C</b>
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Plan B Burger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 801 Pennsylvania Ave NW		Amount of Each Disbursement this Period 346.85
City Washington	State DC	
Zip Code 20004-2615	Purpose of Disbursement Meeting Expense	Transaction ID : <b>B8C95C040263342F085E</b>
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Amazon.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1200 12th Ave S Ste 1200		Amount of Each Disbursement this Period 189.05
City Seattle	State WA	
Zip Code 98144-2734	Purpose of Disbursement Office Supplies	Transaction ID : <b>B8ACF728EA71C4153AE6</b>
Candidate Name	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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 190 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Benchmark Email</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 10532 Los Vaqueros Cir		Amount of Each Disbursement this Period 235.95
City Los Alamitos	State CA	
Zip Code 90720-2525	Purpose of Disbursement E-Marketing	Transaction ID : B1A47693668BC4E489AB
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2211 N 1st St		Amount of Each Disbursement this Period 250.00
City San Jose	State CA	
Zip Code 95131-2021	Purpose of Disbursement Office Supplies	Transaction ID : B269DB95FAB1C465CA95
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mrs. Danielle R. Dold</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 500 Park Dr		Amount of Each Disbursement this Period 296.00
City Kenilworth	State IL	
Zip Code 60043-1005	Purpose of Disbursement See Memo Entry	Transaction ID : B9AECCE4AA434453CBFD
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	296.00
<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 191 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 77 W Wacker Dr			Amount of Each Disbursement this Period 296.00
City Chicago	State IL	Zip Code 60601-1604	
Purpose of Disbursement Airfare		Category/ Type	<b>Transaction ID : BF0435FA8BD994318B30</b>
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)		<b>[MEMO ITEM]</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Peter Collins</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 3200 Barbara Dr			Amount of Each Disbursement this Period 894.99
City Glenview	State IL	Zip Code 60026-1179	
Purpose of Disbursement See Memo Entries		Category/ Type	<b>Transaction ID : B0F45E63631E248518DE</b>
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:			

Full Name (Last, First, Middle Initial) <b>c. Indian American Community of Vernon Hills</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 181 Baltustrol Dr			Amount of Each Disbursement this Period 250.00
City Vernon Hills	State IL	Zip Code 60061-3805	
Purpose of Disbursement Event Sponsorship		Category/ Type	<b>Transaction ID : BD252B3A2386448F4974</b>
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)		<b>[MEMO ITEM]</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	894.99
<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 192 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mariano's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 1822 Willow Rd		Amount of Each Disbursement this Period 30.00
City Northfield	State IL Zip Code 60093-2926	
Purpose of Disbursement Meeting Expense	Category/Type	Transaction ID : B707D0754067C425F89F <b>[MEMO ITEM]</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Peter Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 3200 Barbara Dr		Amount of Each Disbursement this Period 496.49
City Glenview	State IL Zip Code 60026-1179	
Purpose of Disbursement Mileage Reimbursement	Category/Type	Transaction ID : BD07B1CAC93214BE985C <b>[MEMO ITEM]</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. North Shore Community Bank &amp; Trust Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 576 Lincoln Ave		Amount of Each Disbursement this Period 5643.26
City Winnetka	State IL Zip Code 60093-2308	
Purpose of Disbursement See Memo Entries	Category/Type	Transaction ID : B6061AAD45B1741BDAC6
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).....	5643.26
<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 193 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement													
<b>A. Benchmark Email</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015		
M M	/	D D	/	Y Y Y Y											
12		01		2015											
Mailing Address 10532 Los Vaqueros Cir		Amount of Each Disbursement this Period													
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Los Alamitos</td> <td>CA</td> <td>90720-2525</td> </tr> </table>		City	State	Zip Code	Los Alamitos	CA	90720-2525	<table border="1"> <tr> <td>235.95</td> </tr> </table>		235.95					
City	State	Zip Code													
Los Alamitos	CA	90720-2525													
235.95															
Purpose of Disbursement E-Marketing		Transaction ID : B4A9904C619FE4FA9B5A													
Candidate Name		[MEMO ITEM]													
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> <td rowspan="3"> <input type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)                 </td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>		Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Senate		President	State:	District:				
Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
	Senate														
	President														
State:	District:														

Full Name (Last, First, Middle Initial)		Date of Disbursement													
<b>B. NationBuilder</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015		
M M	/	D D	/	Y Y Y Y											
12		01		2015											
Mailing Address 448 S Hill St, Ste 200		Amount of Each Disbursement this Period													
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90013-1155</td> </tr> </table>		City	State	Zip Code	Los Angeles	CA	90013-1155	<table border="1"> <tr> <td>96.00</td> </tr> </table>		96.00					
City	State	Zip Code													
Los Angeles	CA	90013-1155													
96.00															
Purpose of Disbursement Software		Transaction ID : BEBDB0B82EAD8454BBE2													
Candidate Name		[MEMO ITEM]													
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> <td rowspan="3"> <input type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)                 </td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>		Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Senate		President	State:	District:				
Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
	Senate														
	President														
State:	District:														

Full Name (Last, First, Middle Initial)		Date of Disbursement													
<b>C. Schneider's Liquor</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015		
M M	/	D D	/	Y Y Y Y											
12		01		2015											
Mailing Address 300 Massachusetts Ave NE		Amount of Each Disbursement this Period													
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20002-5702</td> </tr> </table>		City	State	Zip Code	Washington	DC	20002-5702	<table border="1"> <tr> <td>366.82</td> </tr> </table>		366.82					
City	State	Zip Code													
Washington	DC	20002-5702													
366.82															
Purpose of Disbursement Event Supplies		Transaction ID : BF03DC8FA2CF54DA2AC9													
Candidate Name		[MEMO ITEM]													
<table border="1"> <tr> <td>Office Sought:</td> <td>House</td> <td rowspan="3">Disbursement For:</td> <td rowspan="3"> <input type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)                 </td> </tr> <tr> <td></td> <td>Senate</td> </tr> <tr> <td></td> <td>President</td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>		Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Senate		President	State:	District:				
Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
	Senate														
	President														
State:	District:														

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 194 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Eventbrite</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 155 5th St, 7th Floor			Amount of Each Disbursement this Period 230.80 Transaction ID : B47DE1673219A45F9AE2 [MEMO ITEM]
City San Francisco	State CA	Zip Code 94103-2919	
Purpose of Disbursement Event Tickets		Candidate Name	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>B. Direct Tv</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 2230 E Imperial Hwy			Amount of Each Disbursement this Period 80.98 Transaction ID : B780552FD11054D6EB70 [MEMO ITEM]
City El Segundo	State CA	Zip Code 90245-3504	
Purpose of Disbursement Internet		Candidate Name	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>C. Casa Luca</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 1099 New York Ave NW			Amount of Each Disbursement this Period 1728.38 Transaction ID : BBAC9255005944956B19 [MEMO ITEM]
City Washington	State DC	Zip Code 20001-4411	
Purpose of Disbursement Event Catering		Candidate Name	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 195 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Paypal</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015
M M	/	D D	/	Y Y Y Y									
12		01		2015									
Mailing Address 2211 N 1st St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Jose</td> <td>CA</td> <td>95131-2021</td> </tr> </table>		City	State	Zip Code	San Jose	CA	95131-2021	<table border="1"> <tr> <td>550.00</td> </tr> </table>		550.00			
City	State	Zip Code											
San Jose	CA	95131-2021											
550.00													
Purpose of Disbursement Office Supplies		Transaction ID : B0D169E96EBC9498091F											
Candidate Name		[MEMO ITEM]											
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:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Public Storage</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015
M M	/	D D	/	Y Y Y Y									
12		01		2015									
Mailing Address 1950 Kelley Court		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Libertyville</td> <td>IL</td> <td>60048-9639</td> </tr> </table>		City	State	Zip Code	Libertyville	IL	60048-9639	<table border="1"> <tr> <td>127.00</td> </tr> </table>		127.00			
City	State	Zip Code											
Libertyville	IL	60048-9639											
127.00													
Purpose of Disbursement Storage Facility Rental		Transaction ID : B8E520111C2BA4ABB8DF											
Candidate Name		[MEMO ITEM]											
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:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. U.S. Postal Service</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		01		2015
M M	/	D D	/	Y Y Y Y									
12		01		2015									
Mailing Address 458 Lenfant Plz SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20024-2114</td> </tr> </table>		City	State	Zip Code	Washington	DC	20024-2114	<table border="1"> <tr> <td>687.85</td> </tr> </table>		687.85			
City	State	Zip Code											
Washington	DC	20024-2114											
687.85													
Purpose of Disbursement Postage		Transaction ID : BF1F776A733AF48EA892											
Candidate Name		[MEMO ITEM]											
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:		Category/Type											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 196 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Intuit, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 42.45
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Software	Transaction ID : B1E824D48D10F48E3AF1
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address PO Box 619616		Amount of Each Disbursement this Period 731.40
City Dfw Airport	State TX	
Zip Code 75261-9616	Purpose of Disbursement Airfare	Transaction ID : B47543DC1D04A40A99E4
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address First Street SE		Amount of Each Disbursement this Period 473.80
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Event Catering	Transaction ID : B964F23D233B444A8909
Candidate Name	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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 197 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Richard W. Porter</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2015</b>
Mailing Address <b>875 Bryant Ave</b>		Amount of Each Disbursement this Period <b>450.00</b> Transaction ID : <b>BD604EC3784E94B069E1</b>
City <b>Winnetka</b>	State <b>IL</b>	
Zip Code <b>60093-1903</b>	Purpose of Disbursement <b>See Memo Entry</b>	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:	

Full Name (Last, First, Middle Initial) <b>B. Kirkland &amp; Ellis, LLP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2015</b>
Mailing Address <b>200 E Randolph St</b>		Amount of Each Disbursement this Period <b>450.00</b> Transaction ID : <b>B10C1AF07D80B44978BB</b> <b>[MEMO ITEM]</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60601-6436</b>	Purpose of Disbursement <b>Event Catering</b>	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:	

Full Name (Last, First, Middle Initial) <b>c. Mrs. Danielle R. Dold</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>500 Park Dr</b>		Amount of Each Disbursement this Period <b>704.80</b> Transaction ID : <b>B6844F51FADCF4F1099E</b>
City <b>Kenilworth</b>	State <b>IL</b>	
Zip Code <b>60043-1005</b>	Purpose of Disbursement <b>See Memo Entry</b>	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).....	<b>1154.80</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 198 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 77 W Wacker Dr		Amount of Each Disbursement this Period 704.80
City Chicago	State IL Zip Code 60601-1604	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : B7102A838F2CD489CA39</b>
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)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Danielle R. Dold</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 500 Park Dr		Amount of Each Disbursement this Period 2182.35
City Kenilworth	State IL Zip Code 60043-1005	
Purpose of Disbursement See Memo Entries	Category/Type	<b>Transaction ID : BA5526FD1CB614E3AA37</b>
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:		

Full Name (Last, First, Middle Initial) <b>C. Jewel Osco</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 411 Green Bay Rd		Amount of Each Disbursement this Period 176.36
City Wilmette	State IL Zip Code 60091-2725	
Purpose of Disbursement Event Supplies	Category/Type	<b>Transaction ID : BD0142E2A7B0C4BD18E4</b>
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)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2182.35
<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 199 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Christine Jarczyk</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 123 Main St		Amount of Each Disbursement this Period 275.00 <b>Transaction ID : B5D3A56C33B3C44D785F</b>
City Schenectady	State NY	
Zip Code 12345-0001	Purpose of Disbursement Event Server	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>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Tiffany Jarczyk</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 123 Main St		Amount of Each Disbursement this Period 275.00 <b>Transaction ID : B354CB05443DA4AB983F</b>
City Schenectady	State NY	
Zip Code 12345-0001	Purpose of Disbursement Event Server	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>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 2900 Patriot Blvd		Amount of Each Disbursement this Period 484.22 <b>Transaction ID : BF431625C3F2542FFBE3</b>
City Glenview	State IL	
Zip Code 60026-8046	Purpose of Disbursement Event Catering/Supplies	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>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 200 OF 203	
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Schaefer's Fine Wine, Gourmet Foods &amp; Spirits</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 9965 Gross Point Rd		Amount of Each Disbursement this Period 971.77
City Skokie	State IL Zip Code 60076-1146	
Purpose of Disbursement Event Beverages	Category/Type	Transaction ID : <b>BD294DD202FA8480685A</b>  <b>[MEMO ITEM]</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sara Karlovics</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 17601 W Mill Creek Crossing Dr		Amount of Each Disbursement this Period 246.59
City Gurnee	State IL Zip Code 60031-1671	
Purpose of Disbursement See Memo Entries	Category/Type	Transaction ID : <b>BCB40D327C27B4715B52</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 263 Shuman Blvd		Amount of Each Disbursement this Period 73.43
City Naperville	State IL Zip Code 60563-8147	
Purpose of Disbursement Office Supplies	Category/Type	Transaction ID : <b>BA3DEA4C096214C6CB33</b>  <b>[MEMO ITEM]</b>
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).....	246.59
<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 201 OF 203			
	<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)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Prosperity Action, Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2015</b>
Mailing Address 1006 Pendleton St		Amount of Each Disbursement this Period <b>3688.47</b> Transaction ID : <b>B86897992CECD439DB48</b>
City Alexandria State VA Zip Code 22314-1837	Purpose of Disbursement See Memo Entries	
Candidate Name <b>Prosperity Action, Inc. PAC</b>		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>B. Bon Vivant Catering</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2015</b>
Mailing Address 1251 Pine Hill Rd		Amount of Each Disbursement this Period <b>3063.47</b> Transaction ID : <b>BC7DCF02368734133AC7</b> [MEMO ITEM]
City McLean State VA Zip Code 22101-2906	Purpose of Disbursement Event Catering	
Candidate Name		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>c. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2015</b>
Mailing Address 1006 Pendleton St		Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>BE5D376EDCC70481F84D</b> [MEMO ITEM]
City Alexandria State VA Zip Code 22314-1837	Purpose of Disbursement Event Fundraising Consulting	
Candidate Name		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3688.47</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>224158.66</b>

**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 202 OF 203			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**DOLD FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mr. Steven Hefter</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 2386 Tennyson Ln		Amount of Each Disbursement this Period 2800.00 <b>Transaction ID : B53AB98EB33DC4538860</b>
City Highland Park	State IL Zip Code 60035-1649	
Purpose of Disbursement Refund	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Christopher Segal</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 34 Lakewood Dr		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : BEF09A096B4064700978</b>
City Glencoe	State IL Zip Code 60022-1327	
Purpose of Disbursement Refund	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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	Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3800.00
<b>TOTAL</b> This Period (last page this line number only).....	3800.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 203 OF 203
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**DOLD FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Rose</b>	Nature of Debt (Purpose): FURNITURE RENTAL
Mailing Address 414 W Frontage Rd	
City State Zip Code Northfield IL 60093-3010	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : D191E54C0D08B4D2E965	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Nahigian Strategies LLC</b>	Nature of Debt (Purpose): Communications Consulting
Mailing Address 331 Cameron Station Blvd	
City State Zip Code Alexandria VA 22304-8600	

Outstanding Balance Beginning This Period 135701.70	Transaction ID : DAD5EB1F2173748698CC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135701.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	138701.70
2) <b>TOTALS</b> This Period (last page this line number only) .....	138701.70
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	138701.70