

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
Nancy Jacobs for Congress

ADDRESS (number and street) 139 N Main Street 201  
Weyrich Cronin And Sorra  
 Check if different than previously reported. (ACC) Bel Air MD 21014

2. **FEC IDENTIFICATION NUMBER** C C00509216 CITY STATE ZIP CODE  
STATE DISTRICT  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) MD 02

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 11 / 06 / 2012 in the State of MD  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period 10 / 01 / 2012 through 10 / 17 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Lesley Lookingbill  
Signature of Treasurer Lesley Lookingbill *[Electronically Filed]* Date 10 / 24 / 2012

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Nancy Jacobs for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	15063	235045.31
(b) Total Contribution Refunds (from Line 20(d)) .....		1700
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15063	233345.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	11272.86	164399.78
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11272.86	164399.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	68945.53	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Nancy Jacobs for Congress**

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

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

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11272.86	164399.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		1700
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		1700
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	11272.86	166099.78

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	65155.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15063
25. SUBTOTAL (add Line 23 and Line 24).....	80218.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11272.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	68945.53

**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 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 801 W St Georges Road

City Baltimore State MD Zip Code 21210

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

Name of Employer Bosworth Properties Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800**

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

**Transaction ID : SA11Ai-CN1094**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 1701 E Wheel Road

City Bel Air State MD Zip Code 21015

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

Name of Employer Boyle Buick GMC Truck Occupation Auto Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : SA11Ai-CN1048**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 4 Forest Drive

City Bel Air State MD Zip Code 21014

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

Name of Employer Boyle Buick GMC Truck Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN1050**

Amount of Each Receipt this Period  
**250**

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 201 Homewood Road

City State Zip Code  
Linthicum MD 21090

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1039**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1 Ivy Brook Farm Ct

City State Zip Code  
Cockeysville MD 21030

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

Name of Employer Occupation  
Diversified Insurance President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1116**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1310 Glendale Rd

City State Zip Code  
Baltimore MD 21239

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

Name of Employer Occupation  
retired retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550**

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

**Transaction ID : SA11Ai-CN1101**

Amount of Each Receipt this Period  
**300**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 5210 Patterson Farm Rd

City State Zip Code  
Baldwin MD 21013

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1054**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 1100 Schucks Road

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation  
The Arena Club Personal Trainer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : SA11Ai-CN1057**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 1337 Macphail Rd E

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : SA11Ai-CN1113**

Amount of Each Receipt this Period  
**1000**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 14119 Blenheim Road N

City State Zip Code  
Phoenix MD 21131

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

Name of Employer Occupation  
Self-employed Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1046**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 2219 Conowingo Rd

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation  
Phillip Durham CPA PA Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

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

**Transaction ID : SA11Ai-CN1036**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 1415 Martin Meadows Dr

City State Zip Code  
Fallston MD 21047

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

Name of Employer Occupation  
Back Flip Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1045**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **PO Box 1501**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN1052**

Amount of Each Receipt this Period  
**250**

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

Mailing Address **1116 Glastonbury Way**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN1051**

Amount of Each Receipt this Period  
**250**

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

Mailing Address **3021 Cool Branch Rd**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200**

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

**Transaction ID : SA11Ai-CN1095**

Amount of Each Receipt this Period  
**200**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1815 Falstaff Road

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation  
Page Appraisal Administrative Assistant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1053**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 202 Glenwood Road

City State Zip Code  
Bel Air MD 21014

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

Name of Employer Occupation  
McComas Funeral Home Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1049**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 4110 East Baker Avenue

City State Zip Code  
Abingdon MD 21009

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

Name of Employer Occupation  
Self-employed Contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : SA11Ai-CN1092**

Amount of Each Receipt this Period  
**1000**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 107 Shell Cove CT

City State Zip Code  
Joppa MD 21085

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

Name of Employer Occupation  
TS2000 LLC Manufactures Represetative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1106**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 4818 Water Park Dr

City State Zip Code  
Belcamp MD 21017

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275**

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

**Transaction ID : SA11Ai-CN1043**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 2603 Stanley Dr

City State Zip Code  
Baldwin MD 21013

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

Name of Employer Occupation  
Century Engineering Civil Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1055**

Amount of Each Receipt this Period  
**250**

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

**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 12 OF 27
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 904 Southern Dr

City State Zip Code  
Bel Air MD 21014

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

Name of Employer Occupation  
Retired retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

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

**Transaction ID : SA11Ai-CN1088**

Amount of Each Receipt this Period  
500

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

Mailing Address P O Box 1861

City State Zip Code  
Bel Air MD 21014

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

Name of Employer Occupation  
Frederick Ward Assoc Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

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

**Transaction ID : SA11Ai-CN1056**

Amount of Each Receipt this Period  
1000

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

Mailing Address 1356 E MacPhail Road

City State Zip Code  
Bel Air MD 21015

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

Name of Employer Occupation  
Town Of Bel Air Public Relations Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

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

**Transaction ID : SA11Ai-CN1047**

Amount of Each Receipt this Period  
500

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

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

2000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 27  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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

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

Mailing Address 13701 Summer Hill Dr

City State Zip Code  
Phoenix MD 21131

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

Name of Employer Occupation  
Layson Moller Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN1058**

Amount of Each Receipt this Period  
**250**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**250.00**

**10300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. Chesapeake PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Congressman Andy Harris Chairman  
 2470 Daniells Bridge Rd Ste 121  
 City Athens State GA Zip Code 30606  
 FEC ID number of contributing federal political committee. **C** C00492819  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11C-CN1103**  
 Amount of Each Receipt this Period  
 250

**B. Conservative Victory Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 15245  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00009704  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : SA11C-CN1079**  
 Amount of Each Receipt this Period  
 250

**C. Republican National Coalition For Life PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address OI Box 618  
 City Alton State IL Zip Code 62002  
 FEC ID number of contributing federal political committee. **C** C00255406  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012  
**Transaction ID : SA11C-CN1108**  
 Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 33 Northfield Avenue

City Edison State NJ Zip Code 08837

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

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

**Transaction ID : SA11C-CN1044**

Amount of Each Receipt this Period  
 1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4133.72
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

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

<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 18 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 702 Southwest 8th Street		Amount of Each Disbursement this Period 24.10
City Bentonville	State AR	
Zip Code 72716	Purpose of Disbursement office supplies	Transaction ID : SB17-EX414 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. A C Moore</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 130 A C Moore Dr		Amount of Each Disbursement this Period 11.93
City Berlin	State NJ	
Zip Code 09009	Purpose of Disbursement fund raiser supplies	Transaction ID : SB17-EX415 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 16.52
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement office supplies	Transaction ID : SB17-EX416 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2012	
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 19 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	415.00
<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 20 OF 27			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1666.83
<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 21 OF 27			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	135.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1368.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>33.85</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 24 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15.79</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 25 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>42.54</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 26 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	530.17
<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 27 OF 27	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2657.43</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>10999.33</b>