

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 9

Write or Type Committee Name
Jacobsen 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))....	5250.00	5250.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	5250.00	5250.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3609.20	3609.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3609.20	3609.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1640.80	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jacobsen 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).....	2500.00	2500.00
(ii) Unitemized.....	250.00	250.00
(iii) TOTAL of contributions from individuals ▶	2750.00	2750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	2500.00	2500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5250.00	5250.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5250.00	5250.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3609.20	3609.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3609.20	3609.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5250.00
25. SUBTOTAL (add Line 23 and Line 24).....	5250.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3609.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1640.80

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

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

FOR LINE NUMBER: PAGE 5 OF 9
(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)
Jacobsen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Lee S Jacobsen

Mailing Address 865 S Highland

City Dearborn State MI Zip Code 48124

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

Name of Employer Jacobsen Industries, Inc Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
 _____ 2500.00
 Contribution

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).....

_____ 2500.00

_____ 2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jacobsen for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Karen E Jacobsen

Mailing Address 865 S Highland

City Dearborn State MI Zip Code 48124

FEC ID number of contributing federal political committee. **C H2MI12131**

Name of Employer: Jacobsen Industries, Inc Occupation: Controller

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2011

Transaction ID : SA11D.4191

Amount of Each Receipt this Period
 100.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. Karen E Jacobsen

Mailing Address 865 S Highland

City Dearborn State MI Zip Code 48124

FEC ID number of contributing federal political committee. **C H2MI12131**

Name of Employer: Jacobsen Industries, Inc Occupation: Controller

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : SA11D.4135

Amount of Each Receipt this Period
 2400.00

Contribution

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).....

2500.00

2500.00

**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 7 OF 9
	<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)
Jacobsen for Congress

Full Name (Last, First, Middle Initial) A. Allegra Print & Imaging		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address 22250 Ford Road		Amount of Each Disbursement this Period 817.05 Transaction ID : SB17.4153
City Dearborn Heights State MI Zip Code 48127	Purpose of Disbursement Letterhead, Envelopes, Labels 006 Category/Type	
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 12		

Full Name (Last, First, Middle Initial) B. Allegra Print & Imaging		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 22250 Ford Road		Amount of Each Disbursement this Period 616.68 Transaction ID : SB17.4154
City Dearborn Heights State MI Zip Code 48127	Purpose of Disbursement Printing of Campaign Booklets 006 Category/Type	
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 12		

Full Name (Last, First, Middle Initial) c. Mrs. Karen E Jacobsen		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 865 S Highland		Amount of Each Disbursement this Period 601.47 Transaction ID : SB17.4170
City Dearborn State MI Zip Code 48124	Purpose of Disbursement Godaddy Web Site 7/7/11 - 12/2/11 004 Category/Type	
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2035.20
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4170

To reimburse Karen Jacobsen for personal credit card funds used to establish & maintain the Godaddy Website for the Campaign

Form/Schedule:

Transaction ID:

**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 9 OF 9	
	<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)
Jacobsen for Congress

Full Name (Last, First, Middle Initial) A. Safeguard Business Systems		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address PO Box 585		Amount of Each Disbursement this Period 231.06 Transaction ID : SB17.4145
City Romeo	State MI	
Zip Code 48065	Purpose of Disbursement Campaign Business Checks	Category/ Type 006
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 12	

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address Fort Dearborn		Amount of Each Disbursement this Period 756.00 Transaction ID : SB17.4168
City Dearborn	State MI	
Zip Code 48124	Purpose of Disbursement USPS fees to mail Campaign Pac Letters	Category/ Type 006
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 12	

Full Name (Last, First, Middle Initial) c. Vistaprint		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2011
Mailing Address 95 Hayden Ave		Amount of Each Disbursement this Period 394.30 Transaction ID : SB17.4142
City Lexington	State MA	
Zip Code 02421	Purpose of Disbursement Campaign Business Cards	Category/ Type 006
Candidate Name Mrs. Karen E Jacobsen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1381.36
TOTAL This Period (last page this line number only).....	3416.56