PAGE 1 / 19

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Com		Offic	e Use Only
NAME OF     COMMITTEE (in fu	TYPE OR PRIN	•	cample: If typing, type er the lines.	12FE4M5	
Dennis Anderso	n for Congress				
ADDRESS (number and s	P.O. Box 858	7			
Check if differ than previously reported. (ACC	y Gunree			IL 6003	1
2. <b>FEC IDENTIFICA</b>	TION NUMBER ▼	CITY		STATE A	ZIP CODE
C C00507459		3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
	orts: Quarterly Report (Q1)	(b) 12-Day <b>PRE</b>	E-Election Report for the Primary (12P)  Convention (12C)	General (12G) Special (12S)	Runoff (12R)
	uarterly Report (Q2) 5 Quarterly Report (Q3)	Election on	M = M / D = D	/ Y Y Y Y	in the State of
January 3	1 Year-End Report (YE)	(c) 30-Day <b>POS</b>	T-Election Report for	the:	
Terminatio	n Report (TER)	Election on	General (30G)	Runoff (30R)	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y Y 2016	through	03 31 Y	Y Y Y 2016
I certify that I have examing the control of the co	mined this Report and t	•	nowledge and belief it	is true, correct and cor	nplete.
Signature of Treasurer	Susan Glad-Anderson	AlideiSUII	[Electronically Filed]	Date 04 /	15 /
	se, erroneous, or incomp	lete information may	subject the person sign	ning this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 19

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

#### **Dennis Anderson for Congress**

01 03 31 2016 01 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 38643.11 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 38643.11 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 0.00 95903.47 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 95903.47 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 5163.74 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 69950.00 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)

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Write or Type Committee Name

#### **Dennis Anderson for Congress**

01 2016 03 31 2016 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)	0.00	14101.00
	(ii) Unitemized	0.00	15341.11
	(iii) TOTAL of contributions from individuals	0.00	29442.11
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	100.00
	(d) The Candidate	0.00	9101.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	38643.11
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	59700.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	59700.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	98343.11

#### **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.	OPE	ERATING EXPENDITURES	0.00	95903.47
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
			0.00	0.00
	(b)	Political Party Committees  Other Political Committees	0.00	0.00
	, ,	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТН	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	95903.47
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	5163.74
24	TOT	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
25.	SUE	BTOTAL (add Line 23 and Line 24)		5163.74
26.	TOT	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
	CAS	SH ON HAND AT CLOSE OF REPORTING		5163.74

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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	13b

DAN5		Detailed Summary Page	(check only one) 13a
AME OF COMMITTEE (In Full) Dennis Anderson for Congress		Transaction	ID : SC/10.4113
LOAN SOURCE Full Name (Last, First, No. 1) Dennis Anderson	Middle Initial) 'PERSONAL FU		ection: 2012 Primary General
Mailing Address P.O. Box 8587			Other (specify) ▼
City	State ZIP Cod	le	
Gurnee	IL 60031		
Original Amount of Loan 25000.00	Cumulative Payment To I	Date Balance	Outstanding at Close of This Period 25000.00
TERMS  Date Incurred  M 12 M / D 16 D / Y Z011 Y Y	Date Due	Interest Rate 31/2012 0.00	Secured:  % (apr)  Yes  No
List All Endorsers or Guarantors (if any)	to Loan Source	Name of Employer	
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	,
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	,
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	,
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	,
SUBTOTALS This Period This Page (optiona	1)	······· <b>\</b>	25000.00
TOTALS This Period (last page in this line o	nly)	······································	7
Carry outstanding balance only to LINE 3, S	chedule D, for this line. If n	o Schedule D, carry forward	to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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	13b

OF

JANS .			Detailed Summary	/ Page	(check only c	ine)	13b
AME OF COMMITTEE (In Full) Dennis Anderson for Congr	ess		Tra	nsaction	ID : SC/10.4275		
LOAN SOURCE Full Name (Last, Dennis Anderson	First, Middle Initial)	PERSONAL FUN	<b>DSJ</b> Memo Item		ction: 2012 Primary General		
Mailing Address P.O. Box 8587					Other (specify)	•	
City	State	ZIP Code					
Gurnee	IL	60031					
Original Amount of Loan	Cumulativ	ve Payment To D	ate	Balance (	Outstanding at	Close of Thi	s Perio
500	0.00	7 7	0.00			5000.0	00
Date Incurred  Mo3 <sup>M</sup> / D15 <sup>D</sup> / Y 2012	Y M M /	Date Due	Interest	Rate 0.00	% (apr)	Secured:	$\times$
List All Endorsers or Guarantors	(if any) to Loan So	urce		-	7 <b>0</b> (api)	Yes	No.
1. Full Name (Last, First, Middle			Name of Employer				
Mailing Address			Occupation				
City	State ZIP Coo	de	Amount Guaranteed Dutstanding:	7			]
2. Full Name (Last, First, Middle In	iitial)	1	Name of Employer				
Mailing Address			Occupation				
City	State ZIP Coo	de	Amount Guaranteed Dutstanding:	7			
3. Full Name (Last, First, Middle In	itial)	1	Name of Employer				
Mailing Address		(	Occupation				
City	State ZIP Coo	de	Amount Guaranteed Dutstanding:	7			
4. Full Name (Last, First, Middle In	iitial)	1	Name of Employer				
Mailing Address		(	Occupation				
City	State ZIP Coo	de	Amount Guaranteed Outstanding:	7			]
UBTOTALS This Period This Page (	optional)		·····		7	5000.0	00
OTALS This Period (last page in thi					, , ,		
arry outstanding balance only to LI	NE 3, Schedule D, fo	or this line. If no	Schedule D, carry	forward	to appropriate	line of Sun	nmary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OF

JANS .		Detailed Summary Page (Crieck Only One)	13b
AME OF COMMITTEE (In Full) Dennis Anderson for Congr	ess	Transaction ID : SC/10.4338	
LOAN SOURCE Full Name (Last, Dennis Anderson	First, Middle Initial) 'PERSON	NAL FUNDS]	
Mailing Address P.O. Box 8587		Other (specify) ▼	
City	State Z	ZIP Code	
Gurnee	IL 6	60031	
Original Amount of Loan	Cumulative Payme	ent To Date  Balance Outstanding at Close of This	s Perio
500	0.00	0.00 5000.0	)0
Date Incurred  Mo3 / P27 / Y 2012	Date	e Due Interest Rate Secured:  / 12/31/2012	$\overline{\mathbf{X}}$
List All Endorsers or Guarantors	(if any) to Loan Source	Yes	Nc
1. Full Name (Last, First, Middle		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	]
2. Full Name (Last, First, Middle I	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle I	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle I	nitial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	]
UBTOTALS This Period This Page	(optional)	\$ 5000.0	00
OTALS This Period (last page in thi			
arry outstanding balance only to L	NE 3, Schedule D, for this li	ine. If no Schedule D, carry forward to appropriate line of Sum	nmary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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LOANS		Detailed Summary Page 138
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress		Transaction ID : SC/10.4284
LOAN SOURCE Full Name (Last, First, Dennis Anderson	Middle Initial) 'PERSONAL	FUNDS] Memo Item Election: 2012 Primary General
Mailing Address P.O. Box 8587		Other (specify) ▼
City Gurnee	State ZIP C	
Original Amount of Loan 5000.00	Cumulative Payment	To Date  Balance Outstanding at Close of This Per  0.00  5000.00
Date Incurred  M 03 M / D 29 D / Y Z 2012 Y	Date Du	ue Interest Rate Secured:  0.00  (apr)
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	al)	5000.00
TOTALS This Period (last page in this line	only)	······
Carry outstanding balance only to LINE 3.	Schedule D, for this line.	If no Schedule D, carry forward to appropriate line of Summary

Use separate schedule(s)

FOR LINE NUMBER:

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	13b

OF

DANS			Detailed Summa		(check only one	•)	<b>(</b> 13	
AME OF COMMITTEE (In Full) Dennis Anderson for Co	naress		Tr	ansaction	ID : SC/10.4467			
LOAN SOURCE Full Name ( Dennis Anderson	Last, First, Middle	e Initial)	Memo Item		ction: 2012 Primary General			
Mailing Address P.O. Box 8587					Other (specify)	,		
City	S	tate ZIP Cod	de					_
Gurnee		IL 60031						
Original Amount of Loan	(	Cumulative Payment To	Date	Balance	Outstanding at Clo	ose of Thi	s Pe	riod
7	2200.00		0.00		, ,	2200.0	00	
TERMS Data Inquirred		Data Dua	Intoros	t Poto		Secured:		
Date Incurred	Ž01Ž Y	Date Due	Interes	0.00	% (apr)		X	
List All Endorsers or Guarar	ntors (if any) to I	_oan Source				Yes		No
1. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	- 7	7	-	]	
2. Full Name (Last, First, Mid-	dle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		-	]	
3. Full Name (Last, First, Mid-	dle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7			]	
4. Full Name (Last, First, Mid-	dle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		-	]	
SUBTOTALS This Period This P	age (optional)		·····		7 7	2200.0	00	_
TOTALS This Period (last page i	in this line only)		·····		7 7			]
Carry outstanding balance only	to LINE 3. Sched	lule D. for this line. If	no Schedule D. carr	v forward	to appropriate lin	ne of Sun	nmar	rv.

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Fu	•	Transac	tion ID : SC/10.4634
Dennis Anderson for	Congress		
LOAN SOURCE Full Nam Dennis Anderson	ne (Last, First, Middle Initial)	Memo Item	Election: 2012 Primary General
Mailing Address P.O. Box 8587			Other (specify)
City	State	ZIP Code	
Gurnee	IL	60031	
Original Amount of Loan	Cumulative Payr	nent To Date Bala	nce Outstanding at Close of This Period
,	1000.00	0.00	1000.00
Date Incurr	ed Da	te Due Interest Rate	Secured:
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First,	* **	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, ,
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period Thi	s Page (optional)	······ •	1000.00
FOTALS This Period (last pa	ge in this line only)		9
Carry outstanding balance of	nly to LINE 3, Schedule D, for this	line. If no Schedule D, carry forw	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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LUANS	Detailed Summary Page (Check Only One) 13a 13b	
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress	Transaction ID : SC/10.4636	
LOAN SOURCE Full Name (Last, First, Middle Initial)  Dennis Anderson	Memo Item  Election: 2012  Primary  General	
Mailing Address P.O. Box 8587	Other (specify)	
City State ZIP Coo Gurnee IL 60031	de	
Original Amount of Loan Cumulative Payment To 400.00	Date Balance Outstanding at Close of This Period  0.00 400.00	
06 16 2012	Interest Rate Secured:  y y y  (apr)  Yes No	
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation  Amount	
City State ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)		
TOTALS This Period (last page in this line only)	······································	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If n	no Schedule D, carry forward to appropriate line of Summary.	

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of th Detailed Summary Pag	
IAME OF COMMITTEE (In Fu	,	Transact	tion ID : SC/10.4637
Dennis Anderson for (	Congress		
LOAN SOURCE Full Nam Dennis Anderson	ne (Last, First, Middle Initial)	Memo Item	Election: 2012 Primary
Mailing Address P.O. Box 8587			General     Other (specify) ▼
City	State	ZIP Code	
Gurnee	IL	60031	
Original Amount of Loan	Cumulative Payn	nent To Date Balar	nce Outstanding at Close of This Period
	400.00	0.00	400.00
Date Incurr	ed Da	te Due Interest Rate	Secured:
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , ,
3. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,
SUBTOTALS This Period This	s Page (optional)	······	400.00
FOTALS This Period (last page	ge in this line only)		
Carry outstanding balance o	nly to LINE 3, Schedule D, for this	line. If no Schedule D, carry forw	ard to appropriate line of Summary.

Use separate schedule(s)

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OANS		for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Fu	,	Transac	tion ID : SC/10.4638
Dennis Anderson for (	Congress		
LOAN SOURCE Full Nam Dennis Anderson	ne (Last, First, Middle Initial)	Memo Item	Election: 2012 Primary General
Mailing Address P.O. Box 8587			Other (specify)
City	State	ZIP Code	
Gurnee	IL	60031	
Original Amount of Loan	Cumulative Payr	nent To Date Bala	nce Outstanding at Close of This Period
	4000.00	0.00	4000.00
Date Incurry  M 06 / 19 / 19	Da D	te Due Interest Rate	Secured:
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,	, ,,	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,
3. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This	s Page (optional)	<b>.</b>	4000.00
FOTALS This Period (last page	ge in this line only)		7 7
Carry outstanding balance o	nly to LINE 3, Schedule D, for this	line. If no Schedule D, carry forw	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS		Detailed Summary Page	(Crieck Only One) 13a
AME OF COMMITTEE (In Full) Dennis Anderson for Congres	S	Transaction	n ID : SC/10.5053
LOAN SOURCE Full Name (Last, Fir Dennis Anderson	st, Middle Initial) 'PERSONAL F		lection: 2012 Primary General
Mailing Address P.O. Box 8587			Other (specify) ▼
City	State ZIP Co	ode	
Gurnee	IL 60031		
Original Amount of Loan	Cumulative Payment To	Date Balance	Outstanding at Close of This Period
3000.00		0.00	3000.00
TERMS  Date Incurred  M07 <sup>M</sup> / D20 <sup>D</sup> / Y 2012 Y	Date Due	Interest Rate None  O.00	Secured:
List All Endorsers or Guarantors (if	any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City Si	tate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	ıl)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initia	ıl)	Name of Employer	
Mailing Address		Occupation	
City Si	tate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initia	ul)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page (opt	ional)	······ •	3000.00
OTALS This Period (last page in this lin			, , , , , , ,
carry outstanding balance only to LINE	3, Schedule D, for this line. If	no Schedule D, carry forward	d to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

		Detailed Summary F	Page	13b
NAME OF COMMITTEE (In Full)		Trans	saction ID : SC/10.505	2
Dennis Anderson for Congress				
LOAN SOURCE Full Name (Last, First, Midd	le Initial) 'PERSONAL FU	NDS] Memo Item	Election: 2012	
Dennis Anderson			Primary	
Mailing Address			General Other (specify	w) <del>-</del>
P.O. Box 8587			Other (speeding	y) <b>\</b>
City	State ZIP Cod	e		
Gurnee	IL 60031			
Original Amount of Loan	Cumulative Payment To [	Date B	salance Outstanding at	Close of This Period
2500.00		0.00		2500.00
TERMS  Date Incurred	Data Dua	Interest D	loto	Coourada
07 Date incurred  M 07 25 7 2012	Date Due	Interest R	0.00	Secured:
07 25 2012		None	% (apr)	Yes No
List All Endorsers or Guarantors (if any) to	Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	-	Amount		
City State	ZIP Code	Guaranteed		
5.17		Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	-	Amount		
City State	ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Contain (East, 1 lies, 1 lies)		Traine of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
	-	Amount		
City State	ZIP Code	Guaranteed Outstanding:	7	
	l.			
SUBTOTALS This Period This Page (optional)			2500.00	
TOTALS This Period (last page in this line only).				
		. 0.1. 1. 5		
Carry outstanding balance only to LINE 3. Sche	dule I), for this line. If n	o Schedule D. carry fo	orward to appropriate	e line of Summary

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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JAN5		Detailed Summary Page (Crieck Only One)
AME OF COMMITTEE (In Full) Dennis Anderson for Congre	SS	Transaction ID : SC/10.5050
LOAN SOURCE Full Name (Last, F	irst, Middle Initial) "PERSON	
Dennis Anderson		Primary  General
Mailing Address P.O. Box 8587		Other (specify) ▼
City	State ZIF	P Code
Gurnee	IL 60	0031
Original Amount of Loan	Cumulative Paymen	nt To Date Balance Outstanding at Close of This Pe
3500.0	00	0.00 3500.00
TERMS  Date Incurred	Date	Due Interest Rate Secured:
M <sub>08</sub> M / D <sub>31</sub> D / Y 2012	Y M M / D D /	None 0.00 % (apr)
List All Endorsers or Guarantors (i	f any) to Loan Source	Yes
1. Full Name (Last, First, Middle In	tial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Init	ial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Init	ial)	Name of Employer
Mailing Address		Occupation
011		Amount Guaranteed
City	State ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Init	ial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
UBTOTALS This Period This Page (or	otional)	3500.00
OTALS This Period (last page in this	line only)	
arry outstanding balance only to LIN	E 3, Schedule D, for this lin	e. If no Schedule D, carry forward to appropriate line of Summar

# SCHEDULE C (FEC Form 3) LOANS

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

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LOANS	Detailed Summary Page (Sheek Shily Shee)
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress	Transaction ID : SC/10.5142
LOAN SOURCE Full Name (Last, First, Middle Initial) "PERSONAL Dennis Anderson	AL FUNDS] Memo Item Election: 2012 Primary General
Mailing Address P.O. Box 8587	Other (specify) ▼
	P Code 1031
Original Amount of Loan Cumulative Paymer	Balance Outstanding at Close of This Period  0.00 2700.00
TERMS  Date Incurred  Date  M 10	Due Interest Rate Secured:  V None 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	7 7 7
TOTALS This Period (last page in this line only)	e. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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JANS .			Detailed Summa	ary Page	(check only of	138
AME OF COMMITTEE (In Full) Dennis Anderson for Congr	ess		Т	ransaction	ID : SC/10.5265	
LOAN SOURCE Full Name (Last Dennis Anderson	First, Middle Initial) 'PE	RSONAL FUN	DSJ Memo Item		ction: 2012 Primary General	
Mailing Address P.O. Box 8587					Other (specify)	▼
City	State	ZIP Code				
Gurnee	IL	60031				
Original Amount of Loan	Cumulative	Payment To Da	ate	Balance	Outstanding at C	Close of This Per
25	0.00	, ,	0.00		, ,	250.00
Date Incurred  Mon / Day / Y 2013	Y M M / D	Date Due	Interes	st Rate	% (apr)	Secured:
List All Endorsers or Guarantors	(if anv) to Loan Source	ce		-	7 <b>6</b> (apr)	Yes N
1. Full Name (Last, First, Middle			lame of Employer			
Mailing Address		C	Occupation			
City	State ZIP Code		mount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle I	nitial)	N	lame of Employer			
Mailing Address		C	Occupation			
City	State ZIP Code		mount Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle I	nitial)	١	lame of Employer			
Mailing Address		C	Occupation			
City	State ZIP Code		mount Guaranteed Outstanding:	,		
4. Full Name (Last, First, Middle I	nitial)	N	lame of Employer			
Mailing Address		(	Occupation			
City	State ZIP Code		amount Guaranteed Outstanding:	7	7	
UBTOTALS This Period This Page	(optional)				7	250.00
OTALS This Period (last page in th	s line only)		·····		7 7	
arry outstanding balance only to L	INE 3, Schedule D, for	this line. If no	Schedule D, car	ry forward	to appropriate	ine of Summar

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			for each category of Detailed Summary P		(check only one)		13a 13b
AME OF COMMITTEE (In Full)			Trans	action I	D : SC/10.5880		100
Dennis Anderson for Co	ongress						
LOAN SOURCE Full Name Dennis Anderson	(Last, First, Middle II	nitial)	Memo Item	Elec	ction: 2014 Primary		
Mailing Address					General Other (specify) ▼		
P.O. Box 8587					Carlor (openity)		
City	State		le				
Gurnee	IL	60031					
Original Amount of Loan		mulative Payment To		alance C	Outstanding at Clos		
	10000.00	, , , ,	0.00		, , , , , , , , , , , , , , , , , , , ,	10000.00	
Date Incurred	Ž014 Y	Date Due	Interest Ra	ate 0.00	% (apr)	ecured:	<b></b>
List All Endorsers or Guara	ntors (if anv) to Loa	an Source			7 <b>0</b> (αρι)	Yes	No
1. Full Name (Last, First, Mi	` • • • • • • • • • • • • • • • • • • •		Name of Employer				
Mailing Address			Occupation				
City	State ZII	Code	Amount Guaranteed Outstanding:	7	, , , ,		
2. Full Name (Last, First, Mic	Idle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZII	P Code	Amount Guaranteed Outstanding:	7	7		
3. Full Name (Last, First, Mic	Idle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZII	<sup>2</sup> Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Mic	Idle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State ZII	P Code	Amount Guaranteed Outstanding:	7			
SUBTOTALS This Period This F	Page (optional)					10000.00	
FOTALS This Period (last page	in this line only)			-	7	69950.00	Ħ
Carry outstanding balance only	to LINE 3, Schedule	D, for this line. If r	no Schedule D, carry fo	rward t	o appropriate line	of Summ	nary.