

# 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

**RODNEY FOR CONGRESS**

ADDRESS (number and street)  PO BOX 344

Check if different than previously reported. (ACC)

**TAYLORVILLE** **IL** **62568-0344**

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼  C C00521948

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

STATE ▼ DISTRICT  IL  13

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  M M /  D D /  Y Y Y Y in the State of

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

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

Election on  M M /  D D /  Y Y Y Y in the State of

5. Covering Period  M M /  D D /  Y Y Y Y through  M M /  D D /  Y Y Y Y

11 /  27 /  2018 through  12 /  31 /  2018

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 **DATWYLER, THOMAS, , ,**

Signature of Treasurer **DATWYLER, THOMAS, , ,** *[Electronically Filed]* Date  M M /  D D /  Y Y Y Y

01 /  15 /  2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**RODNEY 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))....	21370.00	21470.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	21370.00	20470.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	84985.72	88755.28
(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)).....	84985.72	88755.28
8. Cash on Hand at Close of Reporting Period (from Line 27).....	19576.43	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	79616.19	

**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 05/2016)

Write or Type Committee Name

**RODNEY FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	1000.00
(ii) Unitemized.....	370.00	470.00
(iii) TOTAL of contributions from individuals ▶	1370.00	1470.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	21370.00	21470.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	21370.00	21470.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	84985.72	88755.28
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	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS .....	10000.00	10000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	94985.72	99755.28

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93192.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	21370.00
25. SUBTOTAL (add Line 23 and Line 24).....	114562.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	94985.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19576.43

# 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 29  
(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)  
**RODNEY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MAIOCCO, CHRISTINE, , ,**

Mailing Address 3200 COUGAR RDG.

City: SPRINGFIELD    State: IL    Zip Code: 62711-7875

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

Name of Employer: HOMEMAKER    Occupation: HOMEMAKER

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2018

Transaction ID : **A186C38FB4069434AAA8**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 301 TENNESSEE AVE. NE

City: WASHINGTON    State: DC    Zip Code: 20002-6445

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

Name of Employer: RETIRED    Occupation: RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2018

Transaction ID : **A2CC860E3CB3040E8847**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address

City    State    Zip Code

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

Name of Employer    Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1000.00
<b>TOTAL</b> 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 6 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT (WALPAC)**

Mailing Address 702 SW 8TH ST

City BENTONVILLE	State AR	Zip Code 72716-6209
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2018

Transaction ID : **AEA24F6C8DD704D4BB73**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE RECYCLERS ASSOCIATION PAC**

Mailing Address 9113 CHURCH ST

City MANASSAS	State VA	Zip Code 20110-5456
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401125

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2018

Transaction ID : **ABD8A1A42046A4DB88D8**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CONSTELLATION BRANDS INC POLITICAL ACTION COMMITTEE**

Mailing Address 207 HIGH POINT DRIVE  
BLDG. 100

City VICTOR	State NY	Zip Code 14564-1061
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00304832

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2018

Transaction ID : **A694FF6436AB146EF852**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 10TH ST NW  
STE 400

City WASHINGTON State DC Zip Code 20001-5189

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2018

**Transaction ID : A0561151B1DAE4B11AB5**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 N

City WASHINGTON State DC Zip Code 20004-2710

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2018

**Transaction ID : AD5B7E091AB8341C0839**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BLANK ROME LLP PAC**

Mailing Address 1825 I ST NW

City WASHINGTON State DC Zip Code 20006-5403

FEC ID number of contributing federal political committee. **C** C00150797

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2018

**Transaction ID : AEDC84A7C80D04990841**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16TH STREET NW  
SUITE 420

City WASHINGTON State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2018

Transaction ID : **A1F5C638D38D84E6CAC3**

Amount of Each Receipt this Period  
5000.00

Memo Item  
2018 DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**JPMORGAN CHASE & CO. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 10 S DEARBORN STREET  
# IL1-0520

City CHICAGO State IL Zip Code 60603-2300

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2018

Transaction ID : **AC6472899BF814909B04**

Amount of Each Receipt this Period  
2500.00

Memo Item  
2018 DEBT RETIREMENT

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

Mailing Address PO BOX 500

City GLENS FALLS State NY Zip Code 12801

FEC ID number of contributing federal political committee. **C** C00570945

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2018

Transaction ID : **AF385195C442B45BDA28**

Amount of Each Receipt this Period  
1000.00

Memo Item  
2018 DEBT RETIREMENT

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
PAC OF THE AMERICAN ASSOCIATION OF ORTHOPEDIC SURGEONS (PAC OF AAOS)  
 Mailing Address 317 MASSACHUSETTS AVE NE  
 City WASHINGTON State DC Zip Code 20002-5769  
 FEC ID number of contributing federal political committee. **C** C00343137  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2018  
**Transaction ID : AD15C8911AFC449C5ACB**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
AKERMAN LLP PAC  
 Mailing Address 495 N KELLER RD  
 STE 300  
 City MAITLAND State FL Zip Code 32751-8656  
 FEC ID number of contributing federal political committee. **C** C00280008  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2018  
**Transaction ID : A2AB9344EBD774AA5A3A**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN NURSES ASSOCIATION PAC  
 Mailing Address 8515 GEORGIA AVENUE  
 SUITE 400  
 City SILVER SPRING State MD Zip Code 20910-3492  
 FEC ID number of contributing federal political committee. **C** C00017525  
 Name of Employer Occupation  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2018  
**Transaction ID : A9EA3A60E9F364DCC9E1**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item

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

6000.00  
 20000.00

**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 10 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2018
Mailing Address 10000 BESSIE COLEMAN DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60666-5037
Purpose of Disbursement AIRFARE	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 285.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B03F3D3FA343E4ADBB99 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2018
Mailing Address 499 SOUTH CAPITOL STREET SW #407		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-4016
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1482.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BE096212AE33D45BE97A <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PUBLIC OPINION STRATEGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2018
Mailing Address 214 N FAYETTE STREET		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314-2433
Purpose of Disbursement POLLING SERVICES	Category/Type 005	
Candidate Name		Amount of Each Disbursement this Period 15750.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B49AE250F7B994F6FBF0 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17518.04
<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 11 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PNC BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 249 FIFTH AVE			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15222-2707	Amount of Each Disbursement this Period 12.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B29163D7DB94742FBAE6	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MONEYWISE PAYROLL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 1928 ARLINGTON BLVD STE 100			FEC Identification Number C	
City CHARLOTTESVILLE	State VA	Zip Code 22903-1561	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B59014444FBB344F09DB	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PNC BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 249 FIFTH AVE			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15222-2707	Amount of Each Disbursement this Period 640.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B0B61B90B44514DE2B27	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	702.00
<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 12 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018
Mailing Address 10000 BESSIE COLEMAN DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60666-5037
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 1046.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9160973FDA514AB6BE4
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018
Mailing Address 10000 BESSIE COLEMAN DRIVE		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60666-5037
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 1409.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B21D48CBF9C69475484F
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MONEYWISE PAYROLL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018
Mailing Address 1928 ARLINGTON BLVD STE 100		FEC Identification Number C
City CHARLOTTESVILLE	State VA	Zip Code 22903-1561
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2201.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B87F86DB1A2384D06B62
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4657.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POOLE, NOAH, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 19 CIRCLE DRIVE			FEC Identification Number C	
City ROCHESTER	State IL	Zip Code 62563-9301	Amount of Each Disbursement this Period 816.84	
Purpose of Disbursement MILEAGE		Category/ Type 002	Transaction ID : <b>BD12C5F145DC54757AC7</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BUTCHER, MATT, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 609 BURBERRY LANE			FEC Identification Number C	
City ROCHESTER	State IL	Zip Code 62563-9488	Amount of Each Disbursement this Period 4249.79	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : <b>B28D5D009B00D4EF19D7</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PHELPS, ASHLEY, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 1001 I ST SE, APT 510			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-2829	Amount of Each Disbursement this Period 417.83	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : <b>BF90DDA65352F4986B24</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5484.46
<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 14 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DAULBY, JENNIFER, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 2709 DAVIS AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22302-2818	Amount of Each Disbursement this Period 870.00	
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B56B5A7B20DB34BE5B54	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2018	
Mailing Address 10000 BESSIE COLEMAN DRIVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60666-5037	Amount of Each Disbursement this Period 289.20	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B8332F90FB5114915A66	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10000 BESSIE COLEMAN DRIVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60666-5037	Amount of Each Disbursement this Period 5.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B728C72AF399048A6BF6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1164.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10000 BESSIE COLEMAN DRIVE			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60666-5037	Amount of Each Disbursement this Period 5.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B36399A7489C54710800	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B18044E584FAB49F5874	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B6672463C12C54DA8AC3	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	45.60
<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 16 OF 29			
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018		
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B85A1618572DC4C4F9A2		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018		
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B82700D267BB64230A90		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018		
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C		
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B46CF3A5F7C7F4D24976		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	60.00
<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 17 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018
Mailing Address 10701 LAMBERT INTL BLVD		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63145-1000
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : B3BD0B0F694D743BE925
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018
Mailing Address 10701 LAMBERT INTL BLVD		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63145-1000
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : B4BC58C1F5E784318B67
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018
Mailing Address 10701 LAMBERT INTL BLVD		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63145-1000
Purpose of Disbursement TRAVEL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : BDFBDFD0013A4DB483C
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	60.00
<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 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CITY OF ST. LOUIS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 1200 MARKET STREET			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63103-2826	Amount of Each Disbursement this Period 102.00	
Purpose of Disbursement PARKING		Category/ Type 002	Transaction ID : B1FD454351DF041D39FA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FLEMING</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 27 EAST 62ND ST			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10065-8014	Amount of Each Disbursement this Period 257.75	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : B271D698D587A4F469AA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 6695 EDWARDSVILLE CROSSING DRIVE			FEC Identification Number C	
City EDWARDSVILLE	State IL	Zip Code 62025-2704	Amount of Each Disbursement this Period 301.62	
Purpose of Disbursement PHONES		Category/ Type 001	Transaction ID : B02D9A22DCF1148B1853	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	661.37
<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 29			
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MALONEY AND PORCELLI</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 37 E 50TH S			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10022-6820	Amount of Each Disbursement this Period 341.99	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : BB2486EEAD0704F20A82	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 388.96	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : BC7624047A6DD4DABBE5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 388.96	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B9AA5DC46D5A342FBADD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1119.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 388.96	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B174690013AEC4704B98	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2018	
Mailing Address 10701 LAMBERT INTL BLVD			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145-1000	Amount of Each Disbursement this Period 388.96	
Purpose of Disbursement TRAVEL		Category/ Type 002	Transaction ID : B9D06F06E96504414806	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. KINSALE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018	
Mailing Address 2 CENTER PL			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02108-1909	Amount of Each Disbursement this Period 22.73	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : B8C0745D1668A4881842	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	800.65
<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 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. KINSALE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018		
Mailing Address 2 CENTER PL			FEC Identification Number C		
City BOSTON	State MA	Zip Code 02108-1909	Amount of Each Disbursement this Period 112.02		
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : B3A9E1E2F523A464E8C3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018		
Mailing Address 10000 BESSIE COLEMAN DRIVE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60666-5037	Amount of Each Disbursement this Period 505.86		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B7A8ABB467E88469B8EF		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address 10000 BESSIE COLEMAN DRIVE			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60666-5037	Amount of Each Disbursement this Period 235.20		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B40D7E0C908F94ABA944		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	853.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MADELLA STRATEGIES, LLC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018	
Mailing Address 2821 HAVERHILL ROAD			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62711-4071	Amount of Each Disbursement this Period 288.50	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B586E7BE122634E39BEF	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MADELLA STRATEGIES, LLC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018	
Mailing Address 2821 HAVERHILL ROAD			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62711-4071	Amount of Each Disbursement this Period 2800.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BF776BD06CA914033A12	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. 605-615, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018	
Mailing Address 900 CHRISTOPHER LANE SUITE 2			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62712	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement RENT		Category/ Type 001	Transaction ID : BC3E72F8B2D6141C8AB0	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4088.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. 9SEVEN CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2018
Mailing Address 499 SOUTH CAPITOL STREET SW #407		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-4016
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1704.19
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BF7F5BB8DB33E4C2FBF0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. VICTORY PHONES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018
Mailing Address 190 MONROE AVE NW FIFTH FL		FEC Identification Number C
City GRAND RAPIDS	State MI	Zip Code 49503-2628
Purpose of Disbursement POLLING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3980.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2D5756F8083544389FB
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VICTORY PHONES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018
Mailing Address 190 MONROE AVE NW FIFTH FL		FEC Identification Number C
City GRAND RAPIDS	State MI	Zip Code 49503-2628
Purpose of Disbursement POLLING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3980.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0741F5207C7F463E839
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9664.19
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FP1 STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018	
Mailing Address PO BOX 16504			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22302-0154	Amount of Each Disbursement this Period 22817.16	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type 004	Transaction ID : BF2EF289EDE1C4E228DA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE LUKENS COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018	
Mailing Address 2800 SHIRLINGTON ROAD FL 9			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22206-3601	Amount of Each Disbursement this Period 5410.47	
Purpose of Disbursement POSTAGE		Category/ Type 001	Transaction ID : BCD887270EC704FE19F6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. LAW OFFICES OF JOHN FOGARTY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2018	
Mailing Address 4043 N RAVENSWOOD AVENUE SUITE 226			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60613-5682	Amount of Each Disbursement this Period 2940.00	
Purpose of Disbursement LEGAL SERVICES		Category/ Type 001	Transaction ID : BDB848D74C15A47A7879	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	31167.63
<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 29	
	<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)  
**RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PNC BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2018
Mailing Address 249 FIFTH AVE		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15222-2707
Purpose of Disbursement CREDIT CARD PAYMENT		001
Candidate Name		Amount of Each Disbursement this Period 6074.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BF430B4B8D6DE42FE99B
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6074.76
<b>TOTAL</b> This Period (last page this line number only).....▶	84122.38

# 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)  
17 18 19a 19b  
20a 20b 20c  21

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

Full Name (Last, First, Middle Initial) <b>A. ILLINOIS REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2018
Mailing Address PO BOX 64897		FEC Identification Number C C00005926
City CHICAGO	State IL	Zip Code 60664-0897
Purpose of Disbursement POLITICAL CONTRIBUTION		011
Candidate Name ILLINOIS REPUBLICAN PARTY		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 10000.00
State: District:		Transaction ID : BBC614C42E204477BB0D <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY PHONES</b>			Nature of Debt (Purpose): POLLING
Mailing Address 190 MONROE AVE NW FIFTH FL			
City GRAND RAPIDS	State MI	Zip Code 49503-2628	

Outstanding Balance Beginning This Period 3980.00	Transaction ID : D6C3CDF96F2AD438185C	
Amount Incurred This Period 0.00	Payment This Period 3980.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>THE LUKENS COMPANY</b>			Nature of Debt (Purpose): POSTAGE
Mailing Address 2800 SHIRLINGTON ROAD FL 9			
City ARLINGTON	State VA	Zip Code 22206-3601	

Outstanding Balance Beginning This Period 5410.47	Transaction ID : D7915AC72CEBD4638BB9	
Amount Incurred This Period 0.00	Payment This Period 5410.47	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GULA GRAHAM GROUP</b>			Nature of Debt (Purpose): FUNDRAISING COMMISSION
Mailing Address 499 S CAPITOL STREET SW SUITE 420			
City WASHINGTON	State DC	Zip Code 20003-4027	

Outstanding Balance Beginning This Period 55925.41	Transaction ID : D65674F7A2AD64BD6BD6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 55925.41

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	55925.41
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>VICTORY PHONES</b>		Nature of Debt (Purpose): POLLING
Mailing Address 190 MONROE AVE NW FIFTH FL		
City GRAND RAPIDS	State MI	Zip Code 49503-2628

Outstanding Balance Beginning This Period 3980.00	Transaction ID : DF280BBBFCBC84AD3A5E	
Amount Incurred This Period 0.00	Payment This Period 3980.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FP1 STRATEGIES</b>		Nature of Debt (Purpose): COMMUNICATIONS CONSULTING
Mailing Address PO BOX 16504		
City ALEXANDRIA	State VA	Zip Code 22302-0154

Outstanding Balance Beginning This Period 22817.16	Transaction ID : D633A8A5F627B42EEAB2	
Amount Incurred This Period 0.00	Payment This Period 22817.16	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BKZ INC</b>		Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address PO BOX 577832		
City CHICAGO	State IL	Zip Code 60657-7340

Outstanding Balance Beginning This Period 23690.78	Transaction ID : D2C94146DC80141E39FB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23690.78

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	23690.78
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LAW OFFICES OF JOHN FOGARTY</b>			Nature of Debt (Purpose): <b>LEGAL SERVICES</b>
Mailing Address <b>4043 N RAVENSWOOD AVENUE SUITE 226</b>			
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60613-5682</b>	

Outstanding Balance Beginning This Period <input type="text" value="2940.00"/>		<b>Transaction ID : D49EC513D5F4C4BB3865</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2940.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

<b>1) SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="79616.19"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text" value="79616.19"/>