

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Rodney for Congress			
ADDRESS (number and street) PO Box 344			
CITY, STATE, and ZIP CODE Taylorville IL 62568-0344			
2. NAME OF CANDIDATE Rodney L Davis	3. OFFICE SOUGHT (State and District) House IL 13		4. FEC IDENTIFICATION NUMBER C00521948
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Murray R Wise 4309 Crayton Rd Naples FL 34103-8526	Name of Employer Murray Wise Assoc. Transaction ID : 6376B091095F04977E Occupation CEO	Date (month, day, year) 03/11/2016	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Dale Colee 790 Stevens Creek Blvd Forsyth IL 62535-9741	Name of Employer Self Transaction ID : 65104E68C906B4478 Occupation Pharmacist	Date (month, day, year) 03/11/2016	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Davita Healthcare Partners Inc Pac 32275 32nd Ave S Federal Way WA 98001-9616	Name of Employer Transaction ID : 623C78885C9D84108 Occupation	Date (month, day, year) 03/11/2016	Amount 1500.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Independent Insurance Agents & Brokers Of America, Inc. Political Action Committee (insurp) 412 1st Street SE Suite 300 Washington DC 20003-1804	Name of Employer Transaction ID : 624D5C67A4D194EEI Occupation	Date (month, day, year) 03/11/2016	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Natso Inc. Natso Pac 1737 King Street Suite 200 Alexandria VA 22314-2727	Name of Employer Transaction ID : 6A3524ED06CE34A5 Occupation	Date (month, day, year) 03/11/2016	Amount 5000.00
SIGNATURE (optional) Chris Marston <i>[Electronically Filed]</i>		DATE 03/13/2016	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6

(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Western Sugar Cooperative Pac 7555 E Hampden Ave Denver CO 80231-4837	Occupation	03/11/2016	1000.00
	Transaction ID : 64447DED5CBAF44AABA		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Farmers Insurance Pac 2350 Kerner Blvd Ste 250 San Rafael CA 94901-5596	Occupation	03/11/2016	2000.00
	Transaction ID : 606C3612AE30E4C96AFF		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Tate And Lyle Pac Of Tate And Lyle Ingredients Americas Inc 2200 E Eldorado Street Decatur IL 62521-1578	Occupation	03/11/2016	2500.00
	Transaction ID : 62B3BBCE7572E4A35811		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Midwest Region Laborers' Political League 1 N Old State Capitol Plaza Suite 525 Springfield IL 62701-1375	Occupation	03/11/2016	2500.00
	Transaction ID : 656E0BAC33F8D40FCB2B		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
International Council Of Shopping Centers Inc Political Action Committee (icsc Pac) 555 12th Street NW Suite 660 Washington DC 20004-1241	Occupation	03/11/2016	5000.00
	Transaction ID : 672664B32083A43828FC		

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
International Union Of Painters And Allied Trades Political Action Together Political Comm 7234 Parkway Drive Hanover MD 21076-1307	Transaction ID : 6CB87DAA872B04D86AB: Occupation	03/11/2016	5000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
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