

# 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  
**Roskam for Congress Committee**

ADDRESS (number and street) P. O. Box 713  
 Check if different than previously reported. (ACC) Wheaton IL 60187

2. **FEC IDENTIFICATION NUMBER** ▼ C C00410969 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
IL 06

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 03 / 18 / 2014 in the State of IL  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 01 / 01 / 2014 through 02 / 26 / 2014

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 Nancy H. Watkins  
Signature of Treasurer Nancy H. Watkins [Electronically Filed] Date 03 / 11 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Roskam for Congress Committee**

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))....	111604.96	1854105.79
(b) Total Contribution Refunds (from Line 20(d)) .....	2100.00	5400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	109504.96	1848705.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	133953.14	1386965.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	614.91	759.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	133338.23	1386205.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1024791.33	
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).....	1139.98	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Roskam for Congress Committee**

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).....	52172.96	727868.20
(ii) Unitemized.....	11432.00	115621.86
(iii) TOTAL of contributions from individuals ▶	63604.96	843490.06
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	48000.00	1010615.73
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	111604.96	1854105.79
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	37130.00
<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>	614.91	759.91
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	65.81	1633.59
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	112285.68	1893629.29

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	133953.14	1386965.74
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 .....	100.00	3400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2100.00	5400.00
21. OTHER DISBURSEMENTS .....	5000.00	588995.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	141053.14	1981360.74

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1053558.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	112285.68
25. SUBTOTAL (add Line 23 and Line 24).....	1165844.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141053.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1024791.33

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Jeremy Amster**

Mailing Address 3121 W. Sherwin Avenue

City Chicago State IL Zip Code 60645-1239

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44841**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 3S235 Mulberry Lane

City Glen Ellyn State IL Zip Code 60137-7276

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

Name of Employer Occupation  
 Bosch Management Services executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : 40129.C44580**

Amount of Each Receipt this Period  
 Receipt 2250.00

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

Mailing Address 1135 Stoddard Avenue

City Wheaton State IL Zip Code 60187-3723

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

Name of Employer Occupation  
 Lee Hecht Harrison consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 05 / 2014

**Transaction ID : 40106.C44496**

Amount of Each Receipt this Period  
 Receipt 25.00

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

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

525.00

**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 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Baker**

Mailing Address 1135 Stoddard Avenue

City State Zip Code  
Wheaton IL 60187-3723

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

Name of Employer Occupation  
Lee Hecht Harrison consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : 40228.C44676**

Amount of Each Receipt this Period  
25.00

Receipt

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

Mailing Address 433 W. U.S. Highway 20

City State Zip Code  
La Porte IN 46350-8609

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2014

**Transaction ID : 40114.C44511**

Amount of Each Receipt this Period  
1000.00

Receipt

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

Mailing Address 21 Hawkins Circle

City State Zip Code  
Wheaton IL 60189-8463

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
902.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : 40228.C44914**

Amount of Each Receipt this Period  
402.96

In-Kind  
office equipment

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

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

1427.96

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

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

FOR LINE NUMBER: PAGE 7 OF 113  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Brian J. Battle**

Mailing Address 91 Marywood Trail

City State Zip Code  
Wheaton IL 60189-5881

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

Name of Employer Occupation  
Performance Trust director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 20 2014

**Transaction ID : 40129.C44545**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 3711 N. Madison Street

City State Zip Code  
Oak Brook IL 60523-2757

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

Name of Employer Occupation  
Midwest Mechanical Const. c.e.o.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 25 2014

**Transaction ID : 40311.C44999**

Amount of Each Receipt this Period  
 Receipt 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Shlomoh Ben-David**

Mailing Address 9025 Tripp Avenue

City State Zip Code  
Skokie IL 60076-1607

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

Name of Employer Occupation  
AER Services, Inc. manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 07 2014

**Transaction ID : 40228.C44773**

Amount of Each Receipt this Period  
 Receipt 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Birck**

Mailing Address 744 S. Oak Street

City: Hinsdale State: IL Zip Code: 60521-4636

FEC ID number of contributing federal political committee: C

Name of Employer: Tellabs, Inc. Occupation: chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 02 / 04 / 2014

**Transaction ID : 40228.C44763**

Amount of Each Receipt this Period: 2600.00

Receipt

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

Mailing Address 1739 Kay Road

City: Wheaton State: IL Zip Code: 60187-2803

FEC ID number of contributing federal political committee: C

Name of Employer: Food Manufacturing Occupation: sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 05 / 2014

**Transaction ID : 40106.C44495**

Amount of Each Receipt this Period: 25.00

Receipt

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

Mailing Address 1739 Kay Road

City: Wheaton State: IL Zip Code: 60187-2803

FEC ID number of contributing federal political committee: C

Name of Employer: Food Manufacturing Occupation: sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 275.00

Date of Receipt: 02 / 05 / 2014

**Transaction ID : 40228.C44675**

Amount of Each Receipt this Period: 25.00

Receipt

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

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

2650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Tomer Bitton**

Mailing Address 2949 W. Greenleaf Avenue

City Chicago State IL Zip Code 60645-2915

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44845**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 27W731 Garys Mill Road

City Winfield State IL Zip Code 60190-1555

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

Name of Employer Occupation  
 Standard Out-of-Home Media president/c.e.o.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2014

**Transaction ID : 40129.C44568**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 924 Irving Avenue

City Wheaton State IL Zip Code 60187-3840

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

Name of Employer Occupation  
 n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44803**

Amount of Each Receipt this Period  
 Receipt 200.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jonah Bruck</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 6253 N. St. Louis Avenue		<b>Transaction ID : 40228.C44843</b>
City State Zip Code Chicago IL 60659-2209	Amount of Each Receipt this Period Receipt 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Olympia Group, LLC owner	Amount of Each Receipt this Period Receipt 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. William J. Burris</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 3615 Wooded Creek Circle		<b>Transaction ID : 40129.C44575</b>
City State Zip Code Arlington TX 76016-6026	Amount of Each Receipt this Period Receipt 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation USAP physician	Amount of Each Receipt this Period Receipt 450.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>C. Andrew Cantor</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 1416 - 21st Street, N.W., #101		<b>Transaction ID : 40228.C44768</b>
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation American Insurance Assoc. vice-president	Amount of Each Receipt this Period Receipt 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<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 11 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

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

Mailing Address 5N209 Bluff Drive

City Saint Charles State IL Zip Code 60175-5189

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : 40129.C44579**

Amount of Each Receipt this Period  
**25.00**

Receipt

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

Mailing Address 26W074 Mohican Drive

City Wheaton State IL Zip Code 60189-1619

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 07 / 2014**

**Transaction ID : 40228.C44789**

Amount of Each Receipt this Period  
**105.00**

Receipt

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

Mailing Address 1211 S. Prairie Avenue, #2001

City Chicago State IL Zip Code 60605-3653

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

Name of Employer n/a Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : 40228.C44601**

Amount of Each Receipt this Period  
**250.00**

Receipt

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

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

**380.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

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

Mailing Address 2205 Windsor Road

City: Alexandria State: VA Zip Code: 22307

FEC ID number of contributing federal political committee: C

Name of Employer: Navigators Global Occupation: principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 01 / 03 / 2014

**Transaction ID : 40114.C44503**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 325 Indian Point Road

City: Barrington State: IL Zip Code: 60010-3858

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 01 / 27 / 2014

**Transaction ID : 40228.C44613**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 6229 N. Saint Louis Avenue

City: Chicago State: IL Zip Code: 60659-2209

FEC ID number of contributing federal political committee: C

Name of Employer: self-employed Occupation: health care

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 07 / 2014

**Transaction ID : 40228.C44846**

Amount of Each Receipt this Period: 250.00

Receipt

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

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

450.00

**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 13 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. H. Paul DeGroot</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014	
Mailing Address 1S500 Fairview Avenue		<b>Transaction ID : 40129.C44578</b>	
City Lombard	State IL	Zip Code 60148-5017	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 250.00	
Name of Employer Landfill Operators, Inc.	Occupation landfill operator		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00		

Full Name (Last, First, Middle Initial) <b>B. Marjorie E. Dehmlow</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 601 S. 1st Street		<b>Transaction ID : 40129.C44565</b>	
City Dundee	State IL	Zip Code 60118-2905	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 50.00	
Name of Employer n/a	Occupation homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Daniel O. Dickinson</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014	
Mailing Address 9 Lydia Court		<b>Transaction ID : 40129.C44573</b>	
City Hawthorn Woods	State IL	Zip Code 60047-9065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 2100.00	
Name of Employer INAV Group, LLC	Occupation executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<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 14 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Dickinson**

Mailing Address 9 Lydia Court

City Hawthorn Woods State IL Zip Code 60047-9065

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

Name of Employer n/a Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : 40129.C44574**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 21 Ferndale Road

City Deer Park State IL Zip Code 60010-3607

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44757**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 771 Crescent Blvd.

City Glen Ellyn State IL Zip Code 60137-4263

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

Name of Employer Ford Wealth Management Occupation financial advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : 40228.C44892**

Amount of Each Receipt this Period  
50.00

Receipt

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bill L. Gass**

Mailing Address 1 Oak Brook Club Drive, #B106

City: Oak Brook State: IL Zip Code: 60523-1309

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

Name of Employer: n/a Occupation: retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **600.00**

Date of Receipt: 01 / 27 / 2014

**Transaction ID : 40228.C44600**

Amount of Each Receipt this Period: **300.00**

Receipt

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

Mailing Address 9704 N. Range Line Road

City: Mequon State: WI Zip Code: 53092-5604

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

Name of Employer: n/a Occupation: retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2050.00**

Date of Receipt: 01 / 27 / 2014

**Transaction ID : 40228.C44628**

Amount of Each Receipt this Period: **250.00**

Receipt

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

Mailing Address 516 E. Forest Avenue

City: Wheaton State: IL Zip Code: 60187-3836

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

Name of Employer: Wheaton Eye Clinic Occupation: physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **3600.00**

Date of Receipt: 01 / 28 / 2014

**Transaction ID : 40228.C44678**

Amount of Each Receipt this Period: **1000.00**

Receipt

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

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

**1550.00**

**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 16 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Erich G. Gloff**

Mailing Address 2600 S. Finley Road, #3707

City Lombard State IL Zip Code 60148-7012

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : 40228.C44912**

Amount of Each Receipt this Period  
**50.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Franklin F. Grube, Sr.**

Mailing Address 879 River Drive

City Carol Stream State IL Zip Code 60188-9049

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : 40228.C44811**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 1505 N. Morse Street

City Wheaton State IL Zip Code 60187-3435

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

Name of Employer Wheaton Eye Clinic Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44797**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

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

**1150.00**

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

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

FOR LINE NUMBER: PAGE 17 OF 113  
(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)  
**Roskam for Congress Committee**

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

Mailing Address 1010 Arbor Avenue

City State Zip Code  
Wheaton IL 60189-6261

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 07 / 2014**

**Transaction ID : 40228.C44783**

Amount of Each Receipt this Period  
**200.00**

Receipt

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

Mailing Address 835 Warrenville Road

City State Zip Code  
Wheaton IL 60189-6370

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

Name of Employer Occupation  
n/a homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : 40228.C44652**

Amount of Each Receipt this Period  
**50.00**

Receipt

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

Mailing Address 2 Wheaton Center, #1612

City State Zip Code  
Wheaton IL 60187-4974

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : 40228.C44902**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

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

**350.00**

**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 18 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**David J. Hartman**

Mailing Address 6137 N. Bernard Street

City Chicago State IL Zip Code 60659-2211

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

Name of Employer self-employed Occupation health care

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44837**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 13462 W. 167th Street

City Homer Glen State IL Zip Code 60491-8273

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : 40228.C44603**

Amount of Each Receipt this Period  
 Receipt 45.00

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

Mailing Address 224 Harvey Avenue

City Wood Dale State IL Zip Code 60191-1922

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2014

**Transaction ID : 40129.C44530**

Amount of Each Receipt this Period  
 Receipt 100.00

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

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

645.00

**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 19 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Stephen D. Heike</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 224 Harvey Avenue		<b>Transaction ID : 40228.C44758</b>	
City Wood Dale	State IL	Zip Code 60191-1922	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 100.00	
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) <b>B. Jennifer N. Higgins</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 305 S. Payne Street, #306		<b>Transaction ID : 40228.C44772</b>	
City Alexandria	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 250.00	
Name of Employer ChamberHill Strategies	Occupation principal		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Bernadine T. Hines</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014	
Mailing Address 345 E. Hickory Street		<b>Transaction ID : 40114.C44506</b>	
City Hinsdale	State IL	Zip Code 60521-3824	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 250.00	
Name of Employer Global Fire Protection Co.	Occupation executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 20 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Reynard H. Hoffmann**

Mailing Address 5146 Belden Avenue, #C2

City Downers Grove State IL Zip Code 60515-4766

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44788**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 2S715 Summerfield Court

City Wheaton State IL Zip Code 60189-8997

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : 40228.C44890**

Amount of Each Receipt this Period  
**50.00**

Receipt

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

Mailing Address 3136 W. Sherwin Avenue

City Chicago State IL Zip Code 60645-1136

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

Name of Employer self-employed Occupation health care

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44848**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas L. Humphris**

Mailing Address 2103 Silverthorn Drive

City State Zip Code  
Rockford IL 61107-1626

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

Name of Employer Occupation  
Humphris Kiefer & Assoc., Inc sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : 40228.C44611**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 224 Lawton Avenue

City State Zip Code  
Cliffside Park NJ 07010

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

Name of Employer Occupation  
ICEF, Inc. consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : 40228.C44906**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

Mailing Address 831 S. Warrenville Road

City State Zip Code  
Wheaton IL 60189-6370

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**290.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : 40228.C44597**

Amount of Each Receipt this Period  
**35.00**

Receipt

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

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

**1135.00**

**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 22 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Edward C. M. Kang**

Mailing Address 5 Renaissance Square, #31E

City State Zip Code  
White Plains NY 10601

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

Name of Employer self-employed Occupation accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 24 / 2014

**Transaction ID : 40228.C44903**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Edward C. M. Kang**

Mailing Address 5 Renaissance Square, #31E

City State Zip Code  
White Plains NY 10601

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

Name of Employer self-employed Occupation accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 24 / 2014

**Transaction ID : 40228.C44904**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 455 Dayton Avenue, #305

City State Zip Code  
Saint Paul MN 55102-4557

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

Name of Employer US Bancorp Investments Occupation mutual fund technician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1550.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 01 / 2014

**Transaction ID : 40106.C44436**

Amount of Each Receipt this Period  
100.00

Receipt

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

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

1100.00

**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 23 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Gary G. Kaplan**

Mailing Address 455 Dayton Avenue, #305

City Saint Paul State MN Zip Code 55102-4557

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

Name of Employer US Bancorp Investments Occupation mutual fund technician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : 40228.C44881**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 3045 W. Jarlath Street

City Chicago State IL Zip Code 60645-1127

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

Name of Employer Ernst & Young Occupation consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44879**

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address 4611 160th Street, 2nd Floor

City Flushing State NY Zip Code 11358-3632

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

Name of Employer Korean Amer. Civic Empowerment Occupation president

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : 40228.C44907**

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

1350.00

**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 24 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. John R. Kindra</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2014	
Mailing Address 3321 Pomeroy Road		<b>Transaction ID : 40129.C44538</b>	
City Downers Grove	State IL	Zip Code 60515	Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kindra Marine Terminal, Inc.	Occupation president/c.e.o.		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Karl N. Klockars</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2014	
Mailing Address 25 W. 668 Jerome Avenue		<b>Transaction ID : 40129.C44537</b>	
City Wheaton	State IL	Zip Code 60187-2938	Amount of Each Receipt this Period Receipt 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Evangelical Covenant Church	Occupation attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Richard K. Komarek</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014	
Mailing Address 1417 Spyglass Court		<b>Transaction ID : 40228.C44637</b>	
City Itasca	State IL	Zip Code 60143-1971	Amount of Each Receipt this Period Receipt 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer K.R. Komarek, Inc.	Occupation c.e.o.		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 25 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mark E. Langfan**

Mailing Address 480 Park Avenue, #20H

City State Zip Code  
New York NY 10022-1613

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

Name of Employer Occupation  
The Langfan Company manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : 40228.C44712**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

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

Mailing Address 43-24 166th Street

City State Zip Code  
Flushing NY 11358

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

Name of Employer Occupation  
NY Construction Work, Inc. office manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : 40228.C44905**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

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

Mailing Address 46-13 160th Street, #2

City State Zip Code  
Flushing NY 11358-3632

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

Name of Employer Occupation  
Keystone USA office manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : 40228.C44908**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

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

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

3000.00

**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 26 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Janice A. Lehman**

Mailing Address 26W144 Jewell Road

City State Zip Code  
Wheaton IL 60187-3946

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 03 / 2014**

**Transaction ID : 40114.C44502**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 26W144 Jewell Road

City State Zip Code  
Wheaton IL 60187-3946

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 20 / 2014**

**Transaction ID : 40228.C44885**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 2723 County Road, #50N

City State Zip Code  
Minonk IL 61760-9336

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

Name of Employer Occupation  
self-employed agriculture

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : 40228.C44720**

Amount of Each Receipt this Period  
**200.00**

Receipt

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

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

**400.00**

**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 27 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Brian Levinson</b>		Date of Receipt MM / DD / YYYY 02 / 07 / 2014
Mailing Address 3133 W. Sherwin Avenue		<b>Transaction ID : 40228.C44847</b>
City Chicago	State IL	
Zip Code 60645-1135		Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Nathan H. Lichtenstein</b>		Date of Receipt MM / DD / YYYY 02 / 07 / 2014
Mailing Address 3648 Grove Street		<b>Transaction ID : 40228.C44842</b>
City Skokie	State IL	
Zip Code 60076-1902		Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Aronberg Goldgehn et al	Occupation attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Celine M. Lillie</b>		Date of Receipt MM / DD / YYYY 02 / 20 / 2014
Mailing Address 1161 Midwest Lane		<b>Transaction ID : 40303.C44928</b>
City Wheaton	State IL	
Zip Code 60189-7382		Amount of Each Receipt this Period Receipt 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 28 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Mark S. Lillie</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2014	
Mailing Address 1161 Midwest Lane		<b>Transaction ID : 40228.C44889</b>	
City Wheaton	State IL	Zip Code 60189-7382	Amount of Each Receipt this Period Receipt 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kirkland & Ellis	Occupation attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas Lysaught</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014	
Mailing Address 6S080 Hyacinth Court		<b>Transaction ID : 40129.C44571</b>	
City Naperville	State IL	Zip Code 60540	Amount of Each Receipt this Period Receipt 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Zurich North America	Occupation attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Thomas L. Mann</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 28 / 2014	
Mailing Address 1280 Dolphin Bay Way, #502		<b>Transaction ID : 40129.C44577</b>	
City Sarasota	State FL	Zip Code 34242-3037	Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 29 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas L. Mann**

Mailing Address 1280 Dolphin Bay Way, #502

City Sarasota State FL Zip Code 34242-3037

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : 40311.C45009**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 2932 West Greenleaf Avenue

City Chicago State IL Zip Code 60645-2916

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44832**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 3521 Madison Street

City Oak Brook State IL Zip Code 60523-2759

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

Name of Employer Midtronics, Inc. Occupation c.e.o.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : 40228.C44679**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Arthur H. Meyer</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 770 Pearson Street, #804		<b>Transaction ID : 40129.C44560</b>	
City Des Plaines	State IL	Zip Code 60016-9219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 80.00	
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Election Cycle-to-Date 240.00		

Full Name (Last, First, Middle Initial) <b>B. Alan E. Molotsky</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 3939 W. Greenwood Avenue		<b>Transaction ID : 40228.C44844</b>	
City Skokie	State IL	Zip Code 60076-1940	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 250.00	
Name of Employer Oak Ridge Investments, LLC Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation attorney Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Denise Henry Morrissey</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 7400 Park Terrace Drive		<b>Transaction ID : 40228.C44771</b>	
City Alexandria	State VA	Zip Code 22307	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 1500.00	
Name of Employer Capitol Counsel, LLC Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation partner Election Cycle-to-Date 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1830.00
<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 31 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**William F. Nowacki, Jr.**

Mailing Address 22441 N. Newberry Court

City State Zip Code  
Kildeer IL 60047-7946

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
AIMIA management consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40228.C44592**

Amount of Each Receipt this Period

Receipt

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

Mailing Address 5013 Harvey Avenue

City State Zip Code  
Western Springs IL 60558-2040

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Val-Matic Corp. chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40228.C44792**

Amount of Each Receipt this Period

Receipt

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

Mailing Address 5013 Harvey Avenue

City State Zip Code  
Western Springs IL 60558-2040

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Val-Matic Corp. chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40228.C44793**

Amount of Each Receipt this Period

Receipt

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

**TOTAL** 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 32 OF 113  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Pam Olson**

Mailing Address 2819 N. Jefferson Street

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Pricewaterhouse Coopers deputy tax leader

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : 40228.C44850**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address P. O. Box 384

City State Zip Code  
Saint Charles IL 60174-0384

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

Name of Employer Occupation  
Midwest Groundcovers, LLC farmer/chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : 40114.C44501**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 699 Radnor Drive

City State Zip Code  
Roselle IL 60172-2742

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

Name of Employer Occupation  
Dept. of Homeland Security attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : 40228.C44638**

Amount of Each Receipt this Period  
 Receipt 50.00

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

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

1300.00

**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 33 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Eleanor P. Paulson**

Mailing Address 201 N. President Street, #3B

City Wheaton State IL Zip Code 60187-5747

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : 40228.C44715**

Amount of Each Receipt this Period  
**30.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**James P. Philip, Jr.**

Mailing Address 321 S. Dominion Drive

City Wood Dale State IL Zip Code 60191-2312

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

**Transaction ID : 40228.C44868**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 2S027 Country Club Lane

City Wheaton State IL Zip Code 60189-7394

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : 40228.C44659**

Amount of Each Receipt this Period  
**200.00**

Receipt

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

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

**330.00**

**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 34 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Karen Polatsek</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 3100 W. Sherwin Avenue		<b>Transaction ID : 40228.C44835</b>	
City Chicago	State IL	Amount of Each Receipt this Period 250.00	
Zip Code 60645-1136		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	Receipt	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Al Powers</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 15 / 2014	
Mailing Address 3N253 Loretta Drive		<b>Transaction ID : 40129.C44549</b>	
City Saint Charles	State IL	Amount of Each Receipt this Period 500.00	
Zip Code 60175-7609		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer NOW Health Group	Occupation c.e.o.	Receipt	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Jordan H. Ray</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 6110 N. Drake Avenue		<b>Transaction ID : 40228.C44839</b>	
City Chicago	State IL	Amount of Each Receipt this Period 250.00	
Zip Code 60659-2218		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer self-employed	Occupation attorney	Receipt	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 35 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Albert Rose**

Mailing Address P. O. Box 802

City State Zip Code  
Wheaton IL 60187-0802

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

Name of Employer Occupation  
AA Rose Co. executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : 40228.C44900**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address 414 N. Orleans, #402

City State Zip Code  
Chicago IL 60654

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

Name of Employer Occupation  
Lunan Corp. executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : 40129.C44558**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 27 Watergate Drive

City State Zip Code  
South Barrington IL 60010-7125

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

Name of Employer Occupation  
CTI Industries president

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44749**

Amount of Each Receipt this Period  
 Receipt 100.00

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

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

850.00

**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 36 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Verne P. Seehausen**

Mailing Address 910 Camellia Drive, #13

City: Munster State: IN Zip Code: 46321-0475

FEC ID number of contributing federal political committee: C

Name of Employer: Seehausen & Co. Occupation: accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 01 / 31 / 2014

**Transaction ID : 40228.C44721**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 910 Camellia Drive, #13

City: Munster State: IN Zip Code: 46321-0475

FEC ID number of contributing federal political committee: C

Name of Employer: Seehausen & Co. Occupation: accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5100.00

Date of Receipt: 01 / 31 / 2014

**Transaction ID : 40228.C44722**

Amount of Each Receipt this Period: 2500.00

Receipt

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

Mailing Address 103 Muirfield Circle

City: Wheaton State: IL Zip Code: 60189-2738

FEC ID number of contributing federal political committee: C

Name of Employer: Newlyweds Foods Occupation: executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1300.00

Date of Receipt: 02 / 04 / 2014

**Transaction ID : 40228.C44762**

Amount of Each Receipt this Period: 1000.00

Receipt

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

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

3600.00

**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 37 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Donald A. Sender**

Mailing Address 213 White Oak Drive

City State Zip Code  
Wheaton IL 60187-4644

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 08 / 2014**

**Transaction ID : 40129.C44514**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 472 E. Oxford Road

City State Zip Code  
Barrington IL 60010-2190

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

Name of Employer Occupation  
The Fidelity Group real estate developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

**Transaction ID : 40228.C44862**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 13467 N. 2150th Avenue

City State Zip Code  
Geneseo IL 61254-9002

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : 40228.C44649**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

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

**1100.00**

**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 38 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Singer**

Mailing Address 1171 Lexington Lane

City State Zip Code  
Batavia IL 60510-3358

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

Name of Employer Occupation  
US Customs & Border Protection border protection

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 07 / 2014

**Transaction ID : 40228.C44791**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 461 N. Montclair Avenue

City State Zip Code  
Glen Ellyn IL 60137-4631

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

Name of Employer Occupation  
Village Links Golf beverage distributor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 31 / 2014

**Transaction ID : 40228.C44703**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 34 W. Monroe Street

City State Zip Code  
Villa Park IL 60181-3141

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

Name of Employer Occupation  
n/a retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 14 / 2014

**Transaction ID : 40228.C44865**

Amount of Each Receipt this Period  
50.00

Receipt

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

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

250.00

**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 39 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Jerome L. Steffl**

Mailing Address 601 Pennsylvania Ave., N.W.,  
7th Floor

City Washington State DC Zip Code 20004

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

Name of Employer PCMA Occupation v.p. of federal affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40228.C44769**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 1503 E. Evergreen Street

City Wheaton State IL Zip Code 60187-5919

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : 40228.C44639**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 8 S. 245 Derby Lane

City Naperville State IL Zip Code 60540-9551

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

Name of Employer DeVast, Inc. Occupation c.e.o./owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44737**

Amount of Each Receipt this Period  
500.00

Receipt

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

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

1100.00

**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 40 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Grace M. Talbott**

Mailing Address 2400 S. Finley Road, #150

City Lombard State IL Zip Code 60148-6494

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : 40228.C44632**

Amount of Each Receipt this Period  
**100.00**

Receipt

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

Mailing Address 1515 E. Forest Avenue

City Wheaton State IL Zip Code 60187-4469

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

Name of Employer n/a Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : 40228.C44690**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address 1605 E. Forest Avenue

City Wheaton State IL Zip Code 60187-4476

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

Name of Employer Tyndale House Publishers Occupation president

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40130.C44585**

Amount of Each Receipt this Period  
**200.00**

Receipt

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Paul A. Terna</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 1550 Camden Place		<b>Transaction ID : 40228.C44759</b>	
City Wheaton	State IL	Zip Code 60187-7452	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer self-employed	Occupation physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) <b>B. Edward T. Tilly</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 09 / 2014	
Mailing Address 400 S. LaSalle Street		<b>Transaction ID : 40114.C44512</b>	
City Chicago	State IL	Zip Code 60605	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer CBOE	Occupation c.e.o.		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Gary F. Tzeng</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 582 S. Rex Blvd.		<b>Transaction ID : 40228.C44824</b>	
City Elmhurst	State IL	Zip Code 60126-4259	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer DVA	Occupation physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<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 42 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Linda A. Van Der Aa</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014	
Mailing Address 506 W. Maple Street		<b>Transaction ID : 40114.C44509</b>	
City Hinsdale	State IL	Zip Code 60521-3110	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer n/a	Occupation homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>B. Marsha L. Wagner</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 7 Irma Lane		<b>Transaction ID : 40228.C44681</b>	
City Fairview Heights	State IL	Zip Code 62208-1904	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

Full Name (Last, First, Middle Initial) <b>C. Robert A. Warman</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 08 / 2014	
Mailing Address 1445 N. State Parkway, #1405		<b>Transaction ID : 40129.C44524</b>	
City Chicago	State IL	Zip Code 60610-1584	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2800.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 43 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas P. Webster**

Mailing Address 1500 Jennilsa Lane

City Solvang State CA Zip Code 93463-2061

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

Name of Employer Emcare, Inc. Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44774**

Amount of Each Receipt this Period  
 Receipt 150.00

Amount of Each Receipt this Period  
 Receipt 450.00

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

Mailing Address 20 Braeburn Lane

City Barrington Hills State IL Zip Code 60010-9619

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

Name of Employer self-employed Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : 40228.C44882**

Amount of Each Receipt this Period  
 Receipt 500.00

Amount of Each Receipt this Period  
 Receipt 750.00

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

Mailing Address 102 Joyce Court

City Glen Ellyn State IL Zip Code 60137-5614

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

Name of Employer Wiedner & McAuliffe Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : 40228.C44856**

Amount of Each Receipt this Period  
 Receipt 400.00

Amount of Each Receipt this Period  
 Receipt 2600.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Frank J. Wiedner**

Mailing Address 102 Joyce Court

City State Zip Code  
Glen Ellyn IL 60137-5614

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

Name of Employer Occupation  
Wiedner & McAuliffe attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 18 / 2014

**Transaction ID : 40304.C44943**

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 5 Eagle Pointe Drive

City State Zip Code  
Barrington IL 60010-9393

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

Name of Employer Occupation  
Kernow Capital Corp. executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : 40129.C44552**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 5 Eagle Pointe Drive

City State Zip Code  
Barrington IL 60010-9393

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

Name of Employer Occupation  
Kernow Capital Corp. executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 29 / 2014

**Transaction ID : 40130.C44584**

Amount of Each Receipt this Period  
500.00

Receipt

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

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

1100.00

**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 45 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Bruce A. Wilson</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 5 Eagle Pointe Drive		<b>Transaction ID : 40311.C44994</b>	
City Barrington	State IL	Zip Code 60010-9393	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 100.00	
Name of Employer Kernow Capital Corp.	Occupation executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>B. Bruce A. Wilson</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 5 Eagle Pointe Drive		<b>Transaction ID : 40311.C45016</b>	
City Barrington	State IL	Zip Code 60010-9393	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 400.00	
Name of Employer Kernow Capital Corp.	Occupation executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>C. John W. Wymer, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 67 Oak Creek Drive		<b>Transaction ID : 40311.C44993</b>	
City Yorkville	State IL	Zip Code 60560-9779	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 100.00	
Name of Employer n/a	Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 46 OF 113

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

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

Mailing Address 4042 Seminary Road

City Alexandria State VA Zip Code 22304

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

Name of Employer Tarplin, Downs, & Young, LLC Occupation partner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40228.C44770**

Amount of Each Receipt this Period  
 Receipt 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

52172.96

**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 47 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Allied Pilots Association PAC**

Mailing Address 14600 Trinity Blvd., #500

City State Zip Code  
Fort Worth TX 76155

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : 40228.C44816**

Amount of Each Receipt this Period  
 Receipt 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Allstate Insurance Company PAC**

Mailing Address 2775 Sanders Road, #A2W

City State Zip Code  
Northbrook IL 60062-6110

FEC ID number of contributing federal political committee. **C** C00040253

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : 40228.C44913**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Amer. Assn. of Nurse Practitioners PAC**

Mailing Address P. O. Box 12846

City State Zip Code  
Austin TX 78711

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : 40228.C44859**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**American Assn. of Nurse Anesthetists PAC**

Mailing Address 222 S. Prospect Avenue

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : 40228.C44876**

Amount of Each Receipt this Period  
 Receipt 1000.00

Receipt 4500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Benefits Council PAC**

Mailing Address 1501 M Street, N.W., #600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00153171

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44741**

Amount of Each Receipt this Period  
 Receipt 1000.00

Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Association of American Railroads PAC**

Mailing Address 425 Third Street, S.W., #1000

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : 40114.C44505**

Amount of Each Receipt this Period  
 Receipt 1000.00

Receipt 1000.00

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

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

3000.00

**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 49 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CIT Group, Inc. PAC**

Mailing Address 1 Cit Drive, #2223-1

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. **C C00379420**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : 40228.C44729**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CVS/Caremark Corporation Employees PAC**

Mailing Address 1300 I Street, N.W., #525-W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00384818**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : 40228.C44858**

Amount of Each Receipt this Period  
 Receipt 3000.00

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

Mailing Address 1726 M Street, N.W., #501

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00196089**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40228.C44765**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

5000.00

**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 50 OF 113	
	<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)  
**Roskam for Congress Committee**

**A. Express Scripts, Inc. Political Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Express Way

City St. Louis State MO Zip Code 63121

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 10 / 2014

**Transaction ID : 40228.C44815**

Amount of Each Receipt this Period  
Receipt 1000.00

**B. Health Net, Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 455 Capitol Mall, #600

City Sacramento State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C** C00230789

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2014

**Transaction ID : 40228.C44874**

Amount of Each Receipt this Period  
Receipt 1000.00

**C. HealthSouth Corporation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 3660 Grandview Parkway, #200

City Birmingham State AL Zip Code 35243

FEC ID number of contributing federal political committee. **C** C00414649

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 04 / 2014

**Transaction ID : 40228.C44740**

Amount of Each Receipt this Period  
Receipt 1000.00

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

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

3000.00

**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 51 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A. Full Name (Last, First, Middle Initial)**  
**Marriott International, Inc. PAC**

Mailing Address 10400 Fernwood Road

City State Zip Code  
Bethesda MD 20817

FEC ID number of contributing federal political committee. **C C00284810**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : 40228.C44732**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B. Full Name (Last, First, Middle Initial)**  
**National Association of Realtors PAC**

Mailing Address 430 N. Michigan Avenue

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : 40228.C44909**

Amount of Each Receipt this Period  
 Receipt 3000.00

**C. Full Name (Last, First, Middle Initial)**  
**National Retail Federation PAC**

Mailing Address 325 7th Street, N.W., #1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00040329**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40228.C44766**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

5000.00

**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 52 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Natl. Assn. of Health Underwriters PAC**

Mailing Address 1212 New York Avenue, N.W., #1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : 40228.C44767**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Oppenheimer Funds, Inc. PAC**

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : 40114.C44504**

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Prime Therapeutics, LLC Employee PAC**

Mailing Address 1305 Corporate Center Drive

City Saint Paul State MN Zip Code 55121

FEC ID number of contributing federal political committee. **C** C00498105

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44739**

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

4500.00

**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 53 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Printing Industries of America PAC**

Mailing Address 601 13th Street, N.W., #350S

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00018028**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : 40228.C44733**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Prudential Financial, Inc. Federal PAC**

Mailing Address 751 Broad Street, 14th Floor

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : 40228.C44910**

Amount of Each Receipt this Period  
 Receipt 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sanofi-Aventis US, Inc. Employees PAC**

Mailing Address 55 Corporate Drive

City Bridgewater State NJ Zip Code 08807

FEC ID number of contributing federal political committee. **C C00144345**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2014

**Transaction ID : 40129.C44546**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

7000.00

**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 54 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Tenet Healthcare Corporation PAC**

Mailing Address 1445 Ross Avenue, #1400

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00119354

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : 40228.C44738**

Amount of Each Receipt this Period  
 5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**The Doctors Company Federal PAC**

Mailing Address 185 Greenwood Road

City Napa State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 08 / 2014

**Transaction ID : 40129.C44531**

Amount of Each Receipt this Period  
 1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**The Hartford Advocates Fund PAC**

Mailing Address One Hartford Plaza

City Hartford State CT Zip Code 06155

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2014

**Transaction ID : 40129.C44562**

Amount of Each Receipt this Period  
 1000.00

Receipt

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

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

7000.00

**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 55 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**The Travelers Companies, Inc. PAC**

Mailing Address 1 Tower Square

City State Zip Code  
Hartford CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : 40228.C44875**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**To Protect Our Heritage PAC**

Mailing Address 2421 W. Pratt Blvd.

City State Zip Code  
Chicago IL 60645

FEC ID number of contributing federal political committee. **C** C00135541

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : 40228.C44831**

Amount of Each Receipt this Period  
 Receipt  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**U.S. Travel Association PAC**

Mailing Address 1100 New York Avenue, N.W., #450W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00457754

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : 40228.C44857**

Amount of Each Receipt this Period  
 Receipt  
 2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 56 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Unitedhealth Group Inc. PAC**

Mailing Address 9900 Bren Road, E.

City Hopkins State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : 40304.C44932**

Amount of Each Receipt this Period  
 2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Unitedhealth Group Inc. PAC**

Mailing Address 9900 Bren Road, E.

City Hopkins State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : 40304.C44931**

Amount of Each Receipt this Period  
 2500.00

Receipt

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

48000.00

**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 57 OF 113
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**211 E. Illinois, LLC**

Mailing Address **2S266 Center Avenue**

City **Wheaton** State **IL** Zip Code **60187-**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 17 / 2014**

**Transaction ID : 40129.C44557**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 600.00

Offsets to Operating Expenditu

NOTE:office rent refund

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_

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

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

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_

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

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

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

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

\_\_\_\_\_ 600.00

\_\_\_\_\_ 600.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 OF 113  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14  15

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bank of Tampa**

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601-

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1633.59**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : 40228.C44880**

Amount of Each Receipt this Period  
**65.81**

Interest Received

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**65.81**

**65.81**

**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 59 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. ABS Graphics, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address P. O. Box 95019		Amount of Each Disbursement this Period 100.00
City Palatine	State IL	
Zip Code 60095-	Purpose of Disbursement printing	Transaction ID : 40129.E7221
Candidate Name	Category/ Type	
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)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ABS Graphics, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address P. O. Box 95019		Amount of Each Disbursement this Period 100.00
City Palatine	State IL	
Zip Code 60095-	Purpose of Disbursement printing	Transaction ID : 40228.E7336
Candidate Name	Category/ Type	
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)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Solutions for Business</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 8479 Solution Center		Amount of Each Disbursement this Period 297.68
City Chicago	State IL	
Zip Code 60677-	Purpose of Disbursement printing	Transaction ID : 40106.E7130
Candidate Name	Category/ Type	
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)	PRINTING
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	497.68
<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 60 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 205 Pennsylvania Ave., S.E.		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : 40129.E7227</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement software	
Candidate Name	Category/Type	SOFTWARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Telecommunications</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address P. O. Box 5080		Amount of Each Disbursement this Period 52.03 <b>Transaction ID : 40129.E7231</b>
City Carol Stream State IL Zip Code 60197-	Purpose of Disbursement telephone	
Candidate Name	Category/Type	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Eugene C. Batchelar, III</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 21 Hawkins Circle		Amount of Each Disbursement this Period 46.06 <b>Transaction ID : 40106.E7132</b>
City Wheaton State IL Zip Code 60189-8463	Purpose of Disbursement office supplies	
Candidate Name	Category/Type	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1898.09
<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 61 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Eugene C. Batchelar, III</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 21 Hawkins Circle		Amount of Each Disbursement this Period 402.96 <b>Transaction ID : 40228.C44914IK</b>
City Wheaton	State IL	
Zip Code 60189-8463	Purpose of Disbursement office equipment	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	IN KIND: OFFICE EQUIPMENT

Full Name (Last, First, Middle Initial) <b>B. Jeffrey R. Billman</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 1713 S. Arlington Ridge Road		Amount of Each Disbursement this Period 92.35 <b>Transaction ID : 40106.E7116</b>
City Arlington	State VA	
Zip Code 22202-	Purpose of Disbursement salary	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	SALARY

Full Name (Last, First, Middle Initial) <b>c. Jeffrey R. Billman</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 1713 S. Arlington Ridge Road		Amount of Each Disbursement this Period 92.35 <b>Transaction ID : 40130.E7238</b>
City Arlington	State VA	
Zip Code 22202-	Purpose of Disbursement salary	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	587.66
<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 62 OF 113			
	<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)  
**Roskam for Congress Committee**

**A. Cardmember Service**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 15153

City: Wilmington State: DE Zip Code: 19886-  
Purpose of Disbursement: CREDIT CARD:SEE BELOW1  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 01 / 03 / 2014  
Amount of Each Disbursement this Period: 16837.01  
Transaction ID : 40106.E7134  
CREDIT CARD:SEE BELOW1

**B. United Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 28870

City: Tucson State: AZ Zip Code: 85726-8870  
Purpose of Disbursement: travel  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 11 / 14 / 2013  
Amount of Each Disbursement this Period: 37.00  
Transaction ID : 40106.E7140  
[MEMO ITEM]  
MEMO: TRAVEL

**C. United Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 28870

City: Tucson State: AZ Zip Code: 85726-8870  
Purpose of Disbursement: transportation  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 11 / 14 / 2013  
Amount of Each Disbursement this Period: 647.80  
Transaction ID : 40106.E7141  
[MEMO ITEM]  
MEMO: TRANSPORTATION

**SUBTOTAL** of Disbursements This Page (optional) ..... 16837.01

**TOTAL** 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 63 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address P. O. Box 28870		Amount of Each Disbursement this Period 100.00
City Tucson	State AZ	
Zip Code 85726-8870	Purpose of Disbursement transportation	Transaction ID : 40106.E7142
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P. O. Box 28870		Amount of Each Disbursement this Period 244.30
City Tucson	State AZ	
Zip Code 85726-8870	Purpose of Disbursement transportation	Transaction ID : 40106.E7143
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 29.00
City Atlanta	State GA	
Zip Code 30354-	Purpose of Disbursement travel	Transaction ID : 40106.E7144
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 365.80
City Atlanta	State GA Zip Code 30354-	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : 40106.E7145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] MEMO: TRANSPORTATION

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 341.80
City Atlanta	State GA Zip Code 30354-	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : 40106.E7146
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] MEMO: TRANSPORTATION

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 170.90
City Atlanta	State GA Zip Code 30354-	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : 40106.E7147
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] MEMO: TRANSPORTATION

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.			Amount of Each Disbursement this Period 341.80
City Atlanta	State GA	Zip Code 30354-	
Purpose of Disbursement transportation		Category/ Type	<b>Transaction ID : 40106.E7148</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> MEMO: TRANSPORTATION
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.			Amount of Each Disbursement this Period 29.00
City Atlanta	State GA	Zip Code 30354-	
Purpose of Disbursement travel		Category/ Type	<b>Transaction ID : 40106.E7149</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> MEMO: TRAVEL
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.			Amount of Each Disbursement this Period 29.00
City Atlanta	State GA	Zip Code 30354-	
Purpose of Disbursement travel		Category/ Type	<b>Transaction ID : 40106.E7150</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> MEMO: TRAVEL
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 29.00
City Atlanta State GA Zip Code 30354-	Purpose of Disbursement travel Category/Type	
Candidate Name		Transaction ID : 40106.E7151
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 29.00
City Atlanta State GA Zip Code 30354-	Purpose of Disbursement travel Category/Type	
Candidate Name		Transaction ID : 40106.E7152
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 29.00
City Atlanta State GA Zip Code 30354-	Purpose of Disbursement travel Category/Type	
Candidate Name		Transaction ID : 40106.E7153
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 122 N. Wheaton Avenue		Amount of Each Disbursement this Period 920.00
City Wheaton	State IL	
Zip Code 60187-5139	Purpose of Disbursement postage	Transaction ID : 40106.E7154
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 122 N. Wheaton Avenue		Amount of Each Disbursement this Period 46.00
City Wheaton	State IL	
Zip Code 60187-5139	Purpose of Disbursement postage	Transaction ID : 40106.E7155
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 32.62
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40106.E7156
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 45.54
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40106.E7157
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 45.54
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40106.E7158
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 45.54
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40106.E7159
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 45.54
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40106.E7160
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Taxi &amp; Limousine Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period 24.68
City New York	State NY	
Zip Code 10004-	Purpose of Disbursement transportation	Transaction ID : 40114.E7163
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Oceanaire</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1201 F Street, N.W.		Amount of Each Disbursement this Period 1080.97
City Washington	State DC	
Zip Code 20004-	Purpose of Disbursement food & beverage	Transaction ID : 40114.E7165
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013
Mailing Address P. O. Box 25505		Amount of Each Disbursement this Period 521.94
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement telephone	Transaction ID : 40114.E7166
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Teds Bulletin</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 508 8th Street, S.E.		Amount of Each Disbursement this Period 33.18
City Washington	State DC	
Zip Code 20003-	Purpose of Disbursement food & beverage	Transaction ID : 40114.E7167
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Budget Conferencing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 2300 Lakeview Parkway, #225/300		Amount of Each Disbursement this Period 255.03
City Alpharetta	State GA	
Zip Code 30004-	Purpose of Disbursement telephone	Transaction ID : 40114.E7169
Candidate Name	Category/Type	
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)	[MEMO ITEM] MEMO: TELEPHONE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Ruths Chris Steak House</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 724 9th Street, N.W.			Amount of Each Disbursement this Period 2528.06
City Washington	State DC	Zip Code 20001-	Transaction ID : 40114.E7170
Purpose of Disbursement food & beverage		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Marriot Chicago Naperville</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 1801 N. Naper Blvd.			Amount of Each Disbursement this Period 50.22
City Naperville	State IL	Zip Code 60563-	Transaction ID : 40114.E7174
Purpose of Disbursement food & beverage		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marriot Chicago Naperville</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 1801 N. Naper Blvd.			Amount of Each Disbursement this Period 3.33
City Naperville	State IL	Zip Code 60563-	Transaction ID : 40114.E7175
Purpose of Disbursement food & beverage		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. 701 Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 701 Pennsylvania Avenue, N.W.		Amount of Each Disbursement this Period 286.45
City Washington State DC Zip Code 20004-	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7184</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20003-	Purpose of Disbursement membership dues	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7185</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
MEMO: MEMBERSHIP DUES

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 11.49
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7186</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
MEMO: FOOD & BEVERAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 117.50
City Washington State DC Zip Code 20003-	Purpose of Disbursement membership dues Candidate Name Category/Type	
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)		Transaction ID : 40114.E7187 <b>[MEMO ITEM]</b> MEMO: MEMBERSHIP DUES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 219.87
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage Candidate Name Category/Type	
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)		Transaction ID : 40114.E7188 <b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 200.64
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage Candidate Name Category/Type	
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)		Transaction ID : 40114.E7189 <b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 117.50
City Washington State DC Zip Code 20003-	Purpose of Disbursement membership dues	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7190</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		<b>[MEMO ITEM]</b> MEMO: MEMBERSHIP DUES

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 45.83
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7191</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial) <b>c. Marriot Chicago Naperville</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 1801 N. Naper Blvd.		Amount of Each Disbursement this Period 1689.89
City Naperville State IL Zip Code 60563-	Purpose of Disbursement catering	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7192</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		<b>[MEMO ITEM]</b> MEMO: CATERING

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 113			
	<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)  
**Roskam for Congress Committee**

**A. Chicago Cut Steakhouse**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 N. LaSalle Street

City Chicago State IL Zip Code 60654-  
Purpose of Disbursement food & beverage  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
11 / 25 / 2013

Amount of Each Disbursement this Period  
550.06  
Transaction ID : 40114.E7193  
[MEMO ITEM]  
MEMO: FOOD & BEVERAGE

**B. U.S. House of Representatives**

Full Name (Last, First, Middle Initial)  
Mailing Address B-217 Longworth Building

City Washington State DC Zip Code 20515-  
Purpose of Disbursement food & beverage  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
12 / 03 / 2013

Amount of Each Disbursement this Period  
115.65  
Transaction ID : 40114.E7195  
[MEMO ITEM]  
MEMO: FOOD & BEVERAGE

**c. The Congressional Institute**

Full Name (Last, First, Middle Initial)  
Mailing Address 1700 Diagonal Road, #730

City Alexandria State VA Zip Code 22314-  
Purpose of Disbursement conference registration  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement  
12 / 09 / 2013

Amount of Each Disbursement this Period  
890.00  
Transaction ID : 40114.E7197  
[MEMO ITEM]  
MEMO: CONFERENCE REGISTRATION

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** 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 76 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Haute Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 103 3rd Avenue, S.W.		Amount of Each Disbursement this Period 1168.00
City Washington State DC Zip Code 20024-	Purpose of Disbursement catering	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7198</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> MEMO: CATERING

Full Name (Last, First, Middle Initial) <b>B. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address P. O. Box 15153		Amount of Each Disbursement this Period 246.19
City Wilmington State DE Zip Code 19886-	Purpose of Disbursement service charge	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7199</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> MEMO: SERVICE CHARGE

Full Name (Last, First, Middle Initial) <b>c. Hampton Inn &amp; Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2013
Mailing Address 33 W. Illinois Street		Amount of Each Disbursement this Period 300.32
City Chicago State IL Zip Code 60654-	Purpose of Disbursement lodging	
Candidate Name	Category/Type	<b>Transaction ID : 40114.E7200</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> MEMO: LODGING

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Marriot Chicago Naperville</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 1801 N. Naper Blvd.		Amount of Each Disbursement this Period 354.68
City Naperville	State IL Zip Code 60563-	
Purpose of Disbursement catering	Candidate Name	Transaction ID : 40114.E7201
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: CATERING

Full Name (Last, First, Middle Initial) <b>B. Social Reform Kitchen &amp; Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 401 9th Street, N.W.		Amount of Each Disbursement this Period 750.00
City Washington	State DC Zip Code 20004-	
Purpose of Disbursement food & beverage	Candidate Name	Transaction ID : 40114.E7202
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial) <b>C. Natl. Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 320 1st Street, S.E.		Amount of Each Disbursement this Period 1390.00
City Washington	State DC Zip Code 20003-1838	
Purpose of Disbursement event registration	Candidate Name	Transaction ID : 40114.E7204
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] MEMO: EVENT REGISTRATION

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 55.00
City Washington State DC Zip Code 20003-	Category/Type	
Purpose of Disbursement membership dues	Candidate Name	Transaction ID : 40114.E7207  [MEMO ITEM] MEMO: MEMBERSHIP DUES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cardmember Service</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address P. O. Box 15153		Amount of Each Disbursement this Period 13248.98
City Wilmington State DE Zip Code 19886-	Category/Type	
Purpose of Disbursement CREDIT CARD:SEE BELOW	Candidate Name	Transaction ID : 40130.E7247  CREDIT CARD:SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 60 Massachusetts Avenue, N.E.		Amount of Each Disbursement this Period 375.00
City Washington State DC Zip Code 20002-	Category/Type	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : 40228.E7252  [MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13248.98
<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 79 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 60 Massachusetts Avenue, N.E.		Amount of Each Disbursement this Period 2.25
City Washington	State DC	
Zip Code 20002-		Transaction ID : 40228.E7253
Purpose of Disbursement food & beverage	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: FOOD & BEVERAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Taxi &amp; Limousine Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period 19.35
City New York	State NY	
Zip Code 10004-		Transaction ID : 40228.E7254
Purpose of Disbursement transportation	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Taxi &amp; Limousine Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period 23.12
City New York	State NY	
Zip Code 10004-		Transaction ID : 40228.E7255
Purpose of Disbursement transportation	Category/Type	
Candidate Name		[MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial)

**A. Taxi & Limousine Commission**

Mailing Address 33 Beaver Street

City New York State NY Zip Code 10004-

Purpose of Disbursement transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 16 / 2013

Amount of Each Disbursement this Period: 16.12

Transaction ID : 40228.E7256

**[MEMO ITEM]**  
MEMO: TRANSPORTATION

Full Name (Last, First, Middle Initial)

**B. Taxi & Limousine Commission**

Mailing Address 33 Beaver Street

City New York State NY Zip Code 10004-

Purpose of Disbursement transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 17 / 2013

Amount of Each Disbursement this Period: 10.60

Transaction ID : 40228.E7257

**[MEMO ITEM]**  
MEMO: TRANSPORTATION

Full Name (Last, First, Middle Initial)

**C. Taxi & Limousine Commission**

Mailing Address 33 Beaver Street

City New York State NY Zip Code 10004-

Purpose of Disbursement transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 17 / 2013

Amount of Each Disbursement this Period: 9.37

Transaction ID : 40228.E7258

**[MEMO ITEM]**  
MEMO: TRANSPORTATION

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** 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 81 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Taxi & Limousine Commission		M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period
City State Zip Code New York NY 10004-		13.75
Purpose of Disbursement transportation	Category/ Type	Transaction ID : 40228.E7259
Candidate Name		[MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Taxi & Limousine Commission		M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period
City State Zip Code New York NY 10004-		13.62
Purpose of Disbursement transportation	Category/ Type	Transaction ID : 40228.E7260
Candidate Name		[MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Taxi & Limousine Commission		M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period
City State Zip Code New York NY 10004-		44.16
Purpose of Disbursement transportation	Category/ Type	Transaction ID : 40228.E7261
Candidate Name		[MEMO ITEM] MEMO: TRANSPORTATION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Taxi &amp; Limousine Commission</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>15</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		15		2013
M M	/	D D	/	Y Y Y Y									
12		15		2013									
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10004-</td> </tr> </table>		City	State	Zip Code	New York	NY	10004-	<table border="1"> <tr> <td>40.91</td> </tr> </table>		40.91			
City	State	Zip Code											
New York	NY	10004-											
40.91													
Purpose of Disbursement transportation		Transaction ID : 40228.E7262											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEMO: TRANSPORTATION											
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Taxi &amp; Limousine Commission</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		17		2013
M M	/	D D	/	Y Y Y Y									
12		17		2013									
Mailing Address 33 Beaver Street		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10004-</td> </tr> </table>		City	State	Zip Code	New York	NY	10004-	<table border="1"> <tr> <td>38.53</td> </tr> </table>		38.53			
City	State	Zip Code											
New York	NY	10004-											
38.53													
Purpose of Disbursement transportation		Transaction ID : 40228.E7263											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEMO: TRANSPORTATION											
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Amtrak</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		17		2013
M M	/	D D	/	Y Y Y Y									
12		17		2013									
Mailing Address 60 Massachusetts Avenue, N.E.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20002-</td> </tr> </table>		City	State	Zip Code	Washington	DC	20002-	<table border="1"> <tr> <td>259.00</td> </tr> </table>		259.00			
City	State	Zip Code											
Washington	DC	20002-											
259.00													
Purpose of Disbursement transportation		Transaction ID : 40228.E7266											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEMO: TRANSPORTATION											
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:		Category/Type											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 113	
	<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)  
**Roskam for Congress Committee**

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

Mailing Address 60 Massachusetts Avenue, N.E.

City Washington State DC Zip Code 20002-

Purpose of Disbursement food & beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 13 / 2013

Amount of Each Disbursement this Period: 6.00

Transaction ID : 40228.E7267

**[MEMO ITEM]**  
MEMO: FOOD & BEVERAGE

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

Mailing Address P. O. Box 619612

City Dallas State TX Zip Code 75261-

Purpose of Disbursement transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
01 / 08 / 2014

Amount of Each Disbursement this Period: 324.00

Transaction ID : 40228.E7268

**[MEMO ITEM]**  
MEMO: TRANSPORTATION

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

Mailing Address P. O. Box 619612

City Dallas State TX Zip Code 75261-

Purpose of Disbursement travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
01 / 08 / 2014

Amount of Each Disbursement this Period: 14.00

Transaction ID : 40228.E7269

**[MEMO ITEM]**  
MEMO: TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** 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 84 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The New York Palace Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 455 Madison Avenue		Amount of Each Disbursement this Period 2775.03
City New York	State NY	Zip Code 10022-
Purpose of Disbursement lodging	Category/ Type	
Candidate Name	Transaction ID : 40228.E7270	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: LODGING	

Full Name (Last, First, Middle Initial) <b>B. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 105.67
City Wheaton	State IL	Zip Code 60187-1015
Purpose of Disbursement delivery	Category/ Type	
Candidate Name	Transaction ID : 40228.E7271	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: DELIVERY	

Full Name (Last, First, Middle Initial) <b>c. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 55.52
City Wheaton	State IL	Zip Code 60187-1015
Purpose of Disbursement delivery	Category/ Type	
Candidate Name	Transaction ID : 40228.E7272	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] MEMO: DELIVERY	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 25 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 32.47
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40228.E7273
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 55.52
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40228.E7274
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Fedex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 200 Danada Square, W.		Amount of Each Disbursement this Period 55.52
City Wheaton	State IL	
Zip Code 60187-1015	Purpose of Disbursement delivery	Transaction ID : 40228.E7275
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: DELIVERY
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address P. O. Box 28870		Amount of Each Disbursement this Period 306.90
City Tucson	State AZ	
Zip Code 85726-8870	Purpose of Disbursement transportation	Transaction ID : 40228.E7276
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRANSPORTATION
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The New York Palace Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 455 Madison Avenue		Amount of Each Disbursement this Period 1640.62
City New York	State NY	
Zip Code 10022-	Purpose of Disbursement lodging	Transaction ID : 40228.E7277
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: LODGING
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rosa Mexicano</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 575 7th Street		Amount of Each Disbursement this Period 750.00
City Washington	State DC	
Zip Code 20004-	Purpose of Disbursement food & beverage	Transaction ID : 40228.E7278
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The New York Palace Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 455 Madison Avenue			Amount of Each Disbursement this Period 722.05
City New York	State NY	Zip Code 10022-	
Purpose of Disbursement lodging		Candidate Name	Transaction ID : 40228.E7279
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM] MEMO: LODGING

Full Name (Last, First, Middle Initial) <b>B. Johnnys Half Shell</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 400 N. Capitol Street, N.W.			Amount of Each Disbursement this Period 500.00
City Washington	State DC	Zip Code 20001-	
Purpose of Disbursement food & beverage		Candidate Name	Transaction ID : 40228.E7280
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM] MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial) <b>C. NexVortex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 510 Spring Street			Amount of Each Disbursement this Period 128.36
City Herndon	State VA	Zip Code 20170-	
Purpose of Disbursement telephone		Candidate Name	Transaction ID : 40228.E7281
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM] MEMO: TELEPHONE

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Congressional Institute</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 1700 Diagonal Road, #730		Amount of Each Disbursement this Period 817.00
City Alexandria	State VA	Zip Code 22314-
Purpose of Disbursement conference registration	Category/Type	
Candidate Name	Transaction ID : 40228.E7283	
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)	<b>[MEMO ITEM]</b> MEMO: CONFERENCE REGISTRATION
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The New York Palace Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 455 Madison Avenue		Amount of Each Disbursement this Period 669.67
City New York	State NY	Zip Code 10022-
Purpose of Disbursement lodging	Category/Type	
Candidate Name	Transaction ID : 40228.E7284	
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)	<b>[MEMO ITEM]</b> MEMO: LODGING
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Rosa Mexicano</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 575 7th Street		Amount of Each Disbursement this Period 1653.73
City Washington	State DC	Zip Code 20004-
Purpose of Disbursement food & beverage	Category/Type	
Candidate Name	Transaction ID : 40228.E7285	
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)	<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Teds Bulletin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 508 8th Street, S.E.		Amount of Each Disbursement this Period 31.80
City Washington	State DC	
Zip Code 20003-	Purpose of Disbursement food & beverage	Transaction ID : 40228.E7286
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The New York Palace Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 455 Madison Avenue		Amount of Each Disbursement this Period 6.80
City New York	State NY	
Zip Code 10022-	Purpose of Disbursement food & beverage	Transaction ID : 40228.E7287
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 25.00
City Atlanta	State GA	
Zip Code 30354-	Purpose of Disbursement travel	Transaction ID : 40228.E7288
Candidate Name	Category/ Type	
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)	[MEMO ITEM] MEMO: TRAVEL
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial)

**A. Budget Conferencing**

Mailing Address 2300 Lakeview Parkway, #225/300

City Alpharetta State GA Zip Code 30004-

Purpose of Disbursement telephone

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 166.24

Transaction ID : 40228.E7289

**[MEMO ITEM]**  
MEMO: TELEPHONE

Full Name (Last, First, Middle Initial)

**B. Nopa Kitchen & Bar**

Mailing Address 800 F Street, N.W.

City Washington State DC Zip Code 20004-

Purpose of Disbursement food & beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2014

Amount of Each Disbursement this Period: 18.40

Transaction ID : 40228.E7294

**[MEMO ITEM]**  
MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 1st Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement membership dues

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 67.50

Transaction ID : 40228.E7296

**[MEMO ITEM]**  
MEMO: MEMBERSHIP DUES

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** 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 91 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 403.49
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage	
Candidate Name		Category/Type
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)	Transaction ID : 40228.E7297  [MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Subway</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 406 1st Street, S.E.		Amount of Each Disbursement this Period 33.00
City Washington State DC Zip Code 20003-	Purpose of Disbursement food & beverage	
Candidate Name		Category/Type
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)	Transaction ID : 40228.E7305  [MEMO ITEM] MEMO: FOOD & BEVERAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 300 1st Street, S.E.		Amount of Each Disbursement this Period 67.50
City Washington State DC Zip Code 20003-	Purpose of Disbursement membership dues	
Candidate Name		Category/Type
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)	Transaction ID : 40228.E7314  [MEMO ITEM] MEMO: MEMBERSHIP DUES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 300 1st Street, S.E.			Amount of Each Disbursement this Period 43.95
City Washington	State DC	Zip Code 20003-	
Purpose of Disbursement food & beverage		Category/ Type	<b>Transaction ID : 40228.E7315</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Amazon.com</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 1850 Mercer Road			Amount of Each Disbursement this Period 64.17
City Lexington	State KY	Zip Code 40511-1013	
Purpose of Disbursement books		Category/ Type	<b>Transaction ID : 40228.E7318</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> MEMO: BOOKS
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Comcast Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address P. O. Box 3001			Amount of Each Disbursement this Period 78.80
City Southeastern	State PA	Zip Code 19398-	
Purpose of Disbursement internet access/cable		Category/ Type	<b>Transaction ID : 40106.E7131</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		INTERNET ACCESS/CABLE
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	78.80
<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 93 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Dundee Township Republican Org.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 303 Churchill Street		Amount of Each Disbursement this Period 40.00
City Sleepy Hollow	State IL	
Zip Code 60118-	Purpose of Disbursement dinner ticket	<b>Transaction ID : 40228.E7345</b>
Candidate Name	Category/ Type	
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)	<b>DINNER TICKET</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. eDonations.com</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 117 N. Saint Asaph Street		Amount of Each Disbursement this Period 435.71
City Alexandria	State VA	
Zip Code 22314-	Purpose of Disbursement online fundraising	<b>Transaction ID : 40106.E7139</b>
Candidate Name	Category/ Type	
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)	<b>ONLINE FUNDRAISING</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. eDonations.com</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 117 N. Saint Asaph Street		Amount of Each Disbursement this Period 861.93
City Alexandria	State VA	
Zip Code 22314-	Purpose of Disbursement online fundraising	<b>Transaction ID : 40228.E7251</b>
Candidate Name	Category/ Type	
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)	<b>ONLINE FUNDRAISING</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1337.64
<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 94 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Engage, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 725 8th Street, S.E.		Amount of Each Disbursement this Period 894.69
City Washington State DC Zip Code 20003-	Purpose of Disbursement website hosting	
Candidate Name	Category/Type	<b>Transaction ID : 40129.E7228</b>
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)	WEBSITE HOSTING	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Engage, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 725 8th Street, S.E.		Amount of Each Disbursement this Period 195.00
City Washington State DC Zip Code 20003-	Purpose of Disbursement website hosting	
Candidate Name	Category/Type	<b>Transaction ID : 40228.E7353</b>
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)	WEBSITE HOSTING	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. FileMaker, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 5201 Patrick Henry Drive		Amount of Each Disbursement this Period 504.69
City Santa Clara State CA Zip Code 95054-	Purpose of Disbursement software	
Candidate Name	Category/Type	<b>Transaction ID : 40129.E7230</b>
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)	SOFTWARE	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	894.69
<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 95 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Ashley Kramer Heacock</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 226 Robertson Street		Amount of Each Disbursement this Period 3557.62
City Williamsburg	State VA	
Zip Code 23185-	Purpose of Disbursement salary	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ashley Kramer Heacock</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 226 Robertson Street		Amount of Each Disbursement this Period 6027.70
City Williamsburg	State VA	
Zip Code 23185-	Purpose of Disbursement salary	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ashley Kramer Heacock</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 226 Robertson Street		Amount of Each Disbursement this Period 3560.75
City Williamsburg	State VA	
Zip Code 23185-	Purpose of Disbursement salary	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13146.07
<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 96 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 100 W. Randolph Street		Amount of Each Disbursement this Period 145.67
City Chicago	State IL Zip Code 60601-	
Purpose of Disbursement payroll taxes	Candidate Name	Transaction ID : 40106.E7120
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PAYROLL TAXES

Full Name (Last, First, Middle Initial) <b>B. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 100 W. Randolph Street		Amount of Each Disbursement this Period 154.94
City Chicago	State IL Zip Code 60601-	
Purpose of Disbursement payroll taxes	Candidate Name	Transaction ID : 40130.E7242
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PAYROLL TAXES

Full Name (Last, First, Middle Initial) <b>C. Illinois Director of Employment Security</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address P. O. Box 19300		Amount of Each Disbursement this Period 9.16
City Springfield	State IL Zip Code 62794-	
Purpose of Disbursement payroll taxes	Candidate Name	Transaction ID : 40129.E7216
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	309.77
<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 97 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Karla Kirk</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address <b>8901 Grant Street</b>		Amount of Each Disbursement this Period <b>495.66</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20817-</b>	Purpose of Disbursement <b>REIMBURSEMENT:SEE BELOW</b>	
Candidate Name		Category/Type
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)	Transaction ID : <b>40228.E7349</b>
State: District:	REIMBURSEMENT:SEE BELOW	

Full Name (Last, First, Middle Initial) <b>B. Gene &amp; Georgettis Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 17 / 2013</b>
Mailing Address <b>500 N.Franklin Street</b>		Amount of Each Disbursement this Period <b>495.66</b>
City <b>Chicago</b> State <b>IL</b> Zip Code <b>60610-</b>	Purpose of Disbursement <b>food &amp; beverage</b>	
Candidate Name		Category/Type
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)	Transaction ID : <b>40228.E7354</b>
State: District:	<b>[MEMO ITEM]</b> MEMO: FOOD & BEVERAGE	

Full Name (Last, First, Middle Initial) <b>c. Lisle Township Republican Organization</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address <b>6554 Tealwood Drive</b>		Amount of Each Disbursement this Period <b>700.00</b>
City <b>Lisle</b> State <b>IL</b> Zip Code <b>60532-</b>	Purpose of Disbursement <b>advertisement</b>	
Candidate Name		Category/Type
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)	Transaction ID : <b>40228.E7341</b>
State: District:	ADVERTISEMENT	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1195.66</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Master Solutions, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014	
Mailing Address 1S443 Summit Avenue, #206			Amount of Each Disbursement this Period 75.00	
City Oakbrook Terrace	State IL	Zip Code 60181-	Transaction ID : 40129.E7222	
Purpose of Disbursement tech support		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			TECH SUPPORT	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

Full Name (Last, First, Middle Initial) <b>B. Master Solutions, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014	
Mailing Address 1S443 Summit Avenue, #206			Amount of Each Disbursement this Period 1483.99	
City Oakbrook Terrace	State IL	Zip Code 60181-	Transaction ID : 40129.E7223	
Purpose of Disbursement tech support		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			TECH SUPPORT	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

Full Name (Last, First, Middle Initial) <b>c. Master Solutions, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 1S443 Summit Avenue, #206			Amount of Each Disbursement this Period 1181.25	
City Oakbrook Terrace	State IL	Zip Code 60181-	Transaction ID : 40130.E7246	
Purpose of Disbursement tech support		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			TECH SUPPORT	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2740.24
<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 99 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Master Solutions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 1S443 Summit Avenue, #206		Amount of Each Disbursement this Period 50.00
City Oakbrook Terrace	State IL	
Zip Code 60181-	Purpose of Disbursement tech support	Transaction ID : 40228.E7342
Candidate Name	Category/Type	
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)	TECH SUPPORT
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Master Solutions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 1S443 Summit Avenue, #206		Amount of Each Disbursement this Period 93.75
City Oakbrook Terrace	State IL	
Zip Code 60181-	Purpose of Disbursement tech support	Transaction ID : 40228.E7343
Candidate Name	Category/Type	
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)	TECH SUPPORT
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brian McCarthy</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 754 Fox Run Drive		Amount of Each Disbursement this Period 511.04
City Geneva	State IL	
Zip Code 60134-2866	Purpose of Disbursement salary	Transaction ID : 40106.E7117
Candidate Name	Category/Type	
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)	SALARY
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	654.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Brian McCarthy</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 754 Fox Run Drive		Amount of Each Disbursement this Period 511.35 <b>Transaction ID : 40130.E7239</b>
City Geneva State IL Zip Code 60134-2866	Purpose of Disbursement salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Diane McElheney</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 314 E. Harrison Avenue		Amount of Each Disbursement this Period 1270.67 <b>Transaction ID : 40106.E7113</b>
City Wheaton State IL Zip Code 60187-4204	Purpose of Disbursement salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Diane McElheney</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 314 E. Harrison Avenue		Amount of Each Disbursement this Period 1272.43 <b>Transaction ID : 40130.E7235</b>
City Wheaton State IL Zip Code 60187-4204	Purpose of Disbursement salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3054.43
<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 101 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Naperville Township Republican Org.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 1432 Greenlake Drive			Amount of Each Disbursement this Period 500.00
City Aurora	State IL	Zip Code 60502-	Transaction ID : 40129.E7226
Purpose of Disbursement event sponsorship		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EVENT SPONSORSHIP
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. N.W. Suburban Rep. Lincoln Day Dinner</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address P. O. Box 59207			Amount of Each Disbursement this Period 200.00
City Schaumburg	State IL	Zip Code 60159-	Transaction ID : 40228.E7337
Purpose of Disbursement advertisement		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ADVERTISEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paramount Communication Group</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 525-K E. Market Street, #114			Amount of Each Disbursement this Period 259.51
City Leesburg	State VA	Zip Code 20176-	Transaction ID : 40228.E7338
Purpose of Disbursement email services		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EMAIL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	959.51
<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 102 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Patriots United</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address P. O. Box 1148		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40228.E7347</b>
City Woodstock	State IL	
Zip Code 60098-	Purpose of Disbursement event sponsorship	<b>EVENT SPONSORSHIP</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Patton Boggs, LLP</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 2550 M Street, N.W.		Amount of Each Disbursement this Period 465.00 <b>Transaction ID : 40130.E7244</b>
City Washington	State DC	
Zip Code 20037-	Purpose of Disbursement legal services	<b>LEGAL SERVICES</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. David A. Rivera</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 32506 Village Green Blvd.		Amount of Each Disbursement this Period 1744.48 <b>Transaction ID : 40106.E7115</b>
City Warrenville	State IL	
Zip Code 60555-	Purpose of Disbursement salary	<b>SALARY</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2709.48
<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 103 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. David A. Rivera</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 32506 Village Green Blvd.		Amount of Each Disbursement this Period 98.60
City Warrenville State IL Zip Code 60555-	Purpose of Disbursement mileage/postage	
Candidate Name	Category/Type	<b>Transaction ID : 40130.E7245</b>
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)	MILEAGE/POSTAGE	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. David A. Rivera</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 32506 Village Green Blvd.		Amount of Each Disbursement this Period 1892.62
City Warrenville State IL Zip Code 60555-	Purpose of Disbursement salary	
Candidate Name	Category/Type	<b>Transaction ID : 40130.E7237</b>
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)	SALARY	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. SCM Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address P. O. Box 254		Amount of Each Disbursement this Period 1324.07
City Dublin State NH Zip Code 03444-	Purpose of Disbursement direct mail services	
Candidate Name	Category/Type	<b>Transaction ID : 40129.E7229</b>
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)	DIRECT MAIL SERVICES	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3315.29
<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 104 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. SCM Associates, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address P. O. Box 254			Amount of Each Disbursement this Period 5204.45 <b>Transaction ID : 40129.E7224</b>
City Dublin	State NH	Zip Code 03444-	
Purpose of Disbursement direct mail services		Candidate Name	Category/ Type <b>DIRECT MAIL SERVICES</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. SCM Associates, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address P. O. Box 254			Amount of Each Disbursement this Period 1476.36 <b>Transaction ID : 40228.E7339</b>
City Dublin	State NH	Zip Code 03444-	
Purpose of Disbursement direct mail services		Candidate Name	Category/ Type <b>DIRECT MAIL SERVICES</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>c. State Farm</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address P. O. Box 680001			Amount of Each Disbursement this Period 492.00 <b>Transaction ID : 40106.E7133</b>
City Dallas	State TX	Zip Code 75368-	
Purpose of Disbursement insurance		Candidate Name	Category/ Type <b>INSURANCE</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7172.81
<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 105 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Stevenson Office Solutions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 0N321 County Farm Road		Amount of Each Disbursement this Period 765.00
City Winfield	State IL Zip Code 60190-	
Purpose of Disbursement moving services		Transaction ID : 40228.E7250
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MOVING SERVICES
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 24049.73
City Alexandria	State VA Zip Code 22314-	
Purpose of Disbursement fundraising consulting		Transaction ID : 40106.E7129
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 8561.51
City Alexandria	State VA Zip Code 22314-	
Purpose of Disbursement fundraising consulting		Transaction ID : 40129.E7213
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	FUNDRAISING CONSULTING
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	33376.24
<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 106 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 1006 Pendleton Street		Amount of Each Disbursement this Period 8105.59
City Alexandria	State VA	
Zip Code 22314-	Purpose of Disbursement fundraising consulting	Transaction ID : 40228.E7249
Candidate Name	Category/Type	
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)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 2380.25
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement payroll taxes	Transaction ID : 40106.E7118
Candidate Name	Category/Type	
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 3914.35
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement payroll taxes	Transaction ID : 40129.E7218
Candidate Name	Category/Type	
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)	PAYROLL TAXES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14400.19
<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 107 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 289.16 <b>Transaction ID : 40129.E7215</b>
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement payroll taxes	Category/ Type PAYROLL TAXES
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 2432.94 <b>Transaction ID : 40130.E7240</b>
City Atlanta	State GA	
Zip Code 30348-	Purpose of Disbursement payroll taxes	Category/ Type PAYROLL TAXES
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Virginia Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address P. O. Box 27264		Amount of Each Disbursement this Period 243.00 <b>Transaction ID : 40106.E7119</b>
City Richmond	State VA	
Zip Code 23261-	Purpose of Disbursement payroll taxes	Category/ Type PAYROLL TAXES
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2849.10
<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 108 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Virginia Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address P. O. Box 27264		Amount of Each Disbursement this Period 514.00
City Richmond	State VA	Zip Code 23261-
Purpose of Disbursement payroll taxes	Category/Type	
Candidate Name	Transaction ID : 40129.E7219	
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia Department of Taxation</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address P. O. Box 27264		Amount of Each Disbursement this Period 243.00
City Richmond	State VA	Zip Code 23261-
Purpose of Disbursement payroll taxes	Category/Type	
Candidate Name	Transaction ID : 40130.E7241	
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)	PAYROLL TAXES
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert Watkins &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 610 S. Boulevard		Amount of Each Disbursement this Period 3853.98
City Tampa	State FL	Zip Code 33606-
Purpose of Disbursement accounting services	Category/Type	
Candidate Name	Transaction ID : 40106.E7128	
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)	ACCOUNTING SERVICES
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4610.98
<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 109 OF 113			
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Robert Watkins &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 610 S. Boulevard			Amount of Each Disbursement this Period 3750.00
City Tampa	State FL	Zip Code 33606-	
Purpose of Disbursement accounting services		Category/ Type	<b>Transaction ID : 40228.E7350</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		ACCOUNTING SERVICES
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Wheaton Office Center, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address P. O. Box 1339			Amount of Each Disbursement this Period 1677.14
City Saint Charles	State IL	Zip Code 60174-	
Purpose of Disbursement office rent		Category/ Type	<b>Transaction ID : 40106.E7112</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		OFFICE RENT
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Wheaton Office Center, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address P. O. Box 1339			Amount of Each Disbursement this Period 1677.14
City Saint Charles	State IL	Zip Code 60174-	
Purpose of Disbursement office rent		Category/ Type	<b>Transaction ID : 40130.E7248</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		OFFICE RENT
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7104.28
<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 110 OF 113	
	<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)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Wheaton Office Center, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address P. O. Box 1339		Amount of Each Disbursement this Period <b>255.00</b>
City Saint Charles	State IL	Zip Code 60174-
Purpose of Disbursement office repairs	Transaction ID : <b>40228.E7352</b>	
Candidate Name	Category/Type <b>OFFICE REPAIRS</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wheaton Office Center, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address P. O. Box 1339		Amount of Each Disbursement this Period <b>73.26</b>
City Saint Charles	State IL	Zip Code 60174-
Purpose of Disbursement office sign	Transaction ID : <b>40228.E7351</b>	
Candidate Name	Category/Type <b>OFFICE SIGN</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Winfield Township Republican Cent. Comm</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address 313 Arbor Avenue		Amount of Each Disbursement this Period <b>250.00</b>
City West Chicago	State IL	Zip Code 60185-
Purpose of Disbursement event sponsorship	Transaction ID : <b>40228.E7340</b>	
Candidate Name	Category/Type <b>EVENT SPONSORSHIP</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>578.26</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>133557.67</b>

**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 111 OF 113	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Health Care Service Corp. Employees PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address 300 E. Randolph Street, 19th Floor		Amount of Each Disbursement this Period <b>2000.00</b> <b>Transaction ID : 40228.E7325</b>
City Chicago State IL Zip Code 60601-	Purpose of Disbursement Refund of Contribution refund Category/Type <b>010</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2000.00</b>

**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 112 OF 113	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. National Rep. Cong. Comm. Recount Fund</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 28 / 2014</b>
Mailing Address <b>320 First Street, S.E.</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : 40129.E7233</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-</b>	Purpose of Disbursement <b>CONTRIBUTION</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>

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

NAME OF COMMITTEE (In Full)  
**Roskam for Congress Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ABS Graphics, Inc.</b>	Nature of Debt (Purpose): printing
Mailing Address P. O. Box 95019	
City State Zip Code Palatine IL 60095-	

Outstanding Balance Beginning This Period 1339.98	<b>Transaction ID : LS40129.E7221</b>	
Amount Incurred This Period 0.00	Payment This Period 200.00	Outstanding Balance at Close of This Period 1139.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Townsend Group</b>	Nature of Debt (Purpose): fundraising consulting
Mailing Address 1006 Pendleton Street	
City State Zip Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period 32611.24	<b>Transaction ID : LS40106.E7129</b>	
Amount Incurred This Period 0.00	Payment This Period 32611.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cardmember Service</b>	Nature of Debt (Purpose): CREDIT CARD:SEE BELOW1
Mailing Address P. O. Box 15153	
City State Zip Code Wilmington DE 19886-	

Outstanding Balance Beginning This Period 16837.01	<b>Transaction ID : LS40106.E7134</b>	
Amount Incurred This Period 0.00	Payment This Period 16837.01	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1139.98
2) <b>TOTALS</b> This Period (last page this line number only) .....	1139.98
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1139.98