04/15/2021 12 : 26

PAGE 1 / 24

FEC FORM 3		ND DIS	OF REC BURSEI	MENTS			Office Use Only
1. NAME OF COMMITTEE (in		TYPE OR PRINT		ample: If typin er the lines.	g, type	12FE4M5	
Coolidge For C	Congress						
ADDRESS (number ar	nd street)	345 Old Sutton	Road				
▼							
Check if dit than previo reported. (A	usly	Barrington					60010
					S		ZIP CODE
2. FEC IDENTIFIC			3. IS THIS REPORT	× NEW (N)	OR	AMEND (A)	DED STATE ▼ DISTRICT
		eport (Q1)	(b) 12-Day <b>PRE</b>	-Election Repo Primary (12P Convention (		General (1 Special (1:	
Octobe	r 15 Quarter	y Report (Q3)	Election on	M M /	D D /	Y Y Y Y	in the State of
January	/ 31 Year-En	d Report (YE)	(c) 30-Day <b>POS</b>	T-Election Rep	port for the:		
Termina	ation Report	(TER)	Election on	General (30G	) D D /	Runoff (30	IR) Special (30S) in the State of
5. Covering Period		M / D D /	Y Y Y Y 2021	through	M M 03	/ D D / 31	Y Y Y Y 2021
I certify that I have e Type or Print Name		s Report and to Coolidge, Lesl		nowledge and	belief it is tru	ue, correct and	l complete.
Signature of Treasure		idge, Leslie, , ,		[Electronically]	Filed] D	o4	/ D D / Y Y Y Y 15 / 2021
NOTE: Submission of	false, errone	ous, or incomplet	e information may	subject the per	son signing t	his Report to th	ne penalties of 52 U.S.C. §30109.
Office Use Only							FEC FORM 3 (Revised 05/2016)

Ima	ge# 202104159443394600		
	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 24
	/rite or Type Committee Name Coolidge For Congress		
R	eport Covering the Period: From:		$\begin{array}{c} M \\ 03 \\ \end{array} \\ \end{array} \\ \begin{pmatrix} D \\ 31 \\ \end{array} \\ \end{pmatrix} \\ \begin{pmatrix} Y \\ Y \\ 2021 \\ \end{array} \\ \end{array} \\ \begin{pmatrix} Y \\ Y \\ 2021 \\ \end{array} \\ \end{pmatrix}$
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		<u> </u>
	(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
	(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	120.00
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	15.41
	<ul><li>(c) Net Operating Expenditures</li><li>(subtract Line 7(b) from Line 7(a))</li></ul>	0.00	104.59
8.	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
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)	143008.02	

## For further information contact:

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

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

Γ	_ DE	TAILED SUMMARY PAGE	
	FEC Form 3 (Revised 05/2016)	of Receipts	PAGE 3 / 24
Ν	/rite or Type Committee Name		
(	Coolidge For Congress		
R	eport Covering the Period: From:	To:	M         M         /         D         D         /         Y
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14.	OFFSETS TO OPERATING		
_	EXPENDITURES (Refunds, Rebates, etc.)	0.00	15.41
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	, 15.41

Image# 202104159443394601

of Disbursements PAGE 4 / 24 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 120.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) ..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS 0.00 120.00 (add Lines 17, 18, 19(c), 20(d), and 21)

**DETAILED SUMMARY PAGE** 

## **III. CASH SUMMARY**

Image# 202104159443394602

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

•				
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	<sup>ne</sup> (check only one) × 13a
ME OF COMMITTEE (In Full) coolidge For Congress			Transac	tion ID : SC/10.4139
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010	•	X Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Peric
13540.04	9	9	1500.00	12040.04
TERMS Date Incurred	Γ	Date Due	Interest Rate (If none, enter	
M10 <sup>M</sup> / D18 <sup>D</sup> / Y Ž01 <sup>H</sup> Y	M M / D D	/ Y 12	/31/12 <sup>×</sup> 0.	
List All Endorsers or Guarantors (if any) t	to Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(	Amount Guaranteed Dutstanding:	y y
UBTOTALS This Period This Page (optional).			H	12040.04

CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) Coolidge For Congress				Transac	tion ID : SC/10.4138	
LOAN SOURCE Full Name Coolidge, Leslie, , ,	(Last, First, Mic	Idle Initial)		Memo Item	Election: 2012 <b>x</b> Primary General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City Barrington Hills		State IL	ZIP Code 60010	)	X Personal Funds of the Candidat	
Original Amount of Loan	100.00	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Perio	
	Ž01Ť <sup>Y</sup>	M M / D D	Date Due	Interest Rate (If none, enter /31/12 Y 0.0	0)	
List All Endorsers or Guara 1. Full Name (Last, First, Mi		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Mid	Idle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7 7	
3. Full Name (Last, First, Mid	Idle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7	
4. Full Name (Last, First, Mid	Idle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This P				H	100.00	
	-				ard to appropriate line of Summary	

CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In F Coolidge For Congre	,			Transac	tion ID : SC/10.4137	
LOAN SOURCE Full Na Coolidge, Leslie, ,	•	Idle Initial)		🗌 Memo Item	Election: 2012 X Primary General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City Barrington Hills		State IL	ZIP Code 60010	e	X Personal Funds of the Candidat	
Original Amount of Loar	500.00	Cumulative Pa	yment To D	Date Bala 0.00	nce Outstanding at Close of This Perio	
TERMS         Date Incu           M12 <sup>M</sup> /         D15 <sup>D</sup> /	YŽ01Ť Y	M M / D D	Date Due	Interest Rate (If none, enter ý31/12 <sup>Y</sup> 0.0	0)	
List All Endorsers or Gi 1. Full Name (Last, First		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	g g	
2. Full Name (Last, First,	, Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
3. Full Name (Last, First,	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First,	, Middle Initial)	·		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period TI				H	500.00	
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary	

					PAGE 8 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Page	he (check only one) × 13a
AME OF COMMITTEE ( Coolidge For Con	. ,			Transac	ction ID : SC/10.4142
LOAN SOURCE Ful Coolidge, Leslie	I Name (Last, First, Mic	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road					Other (specify) ▼
City Barrington Hills		State IL	ZIP Code 60010	e	Personal Funds of the Candidate
Original Amount of I	_oan 5154.15	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric 5154.15
TERMS         Date           M01 <sup>M</sup> /         D02 <sup>D</sup>	Incurred	M M / D D	Date Due	./01/12	
List All Endorsers o	r Guarantors (if any) t	o Loan Source			
1. Full Name (Last,				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
2. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
<b>CUBTOTALS</b> This Perio					5154.15
Carry outstanding balar	nce only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.

lage# 202104100440004001				r	PAGE 9 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Coolidge For Congre	,			Transac	ction ID : SC/10.4141
LOAN SOURCE Full Na Coolidge, Leslie, ,		Idle Initial)		🗌 Memo Item	Election: 2012 Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	e	X Personal Funds of the Candidate
Original Amount of Loa	n	Cumulative Pa	lyment To D	Date Bala	ance Outstanding at Close of This Perio
,	11000.00			0.00	11000.00
TERMS Date Incu	urred	[	Date Due	Interest Rate (If none, enter	
M02M / D23D /	YŽ01Ž Y	M M / D D	2 / Y 12	ý31/12 <sup>v</sup> 0.	00 % (apr) Yes X No
List All Endorsers or G	auarantors (if any) t	o Loan Source			
1. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · ·
2. Full Name (Last, First	, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First	, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First	t, Middle Initial)	-		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
<b>CUBTOTALS</b> This Period T					7 7 7
Carry outstanding balance	only to LINE 3, Sch	edule D, for thi	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) Coolidge For Congress			Transact	tion ID : SC/10.4140	
LOAN SOURCE Full Name (Last, First, Coolidge, Leslie, , ,	Middle Initial)		Memo Item	Election: 2012 <b>x</b> Primary General	
Mailing Address 345 Old Sutton Road				Other (specify)	
City Barrington Hills	State IL	ZIP Code 60010		X Personal Funds of the Candidat	
Original Amount of Loan 15000.00	Cumulative Pa	ayment To Dat	te Balar 0.00	nce Outstanding at Close of This Perio 15000.00	
TERMS         Date Incurred           M02 <sup>M</sup> /         P26 <sup>D</sup> /         Y         Ž01Ž         Y		Date Due	Interest Rate (If none, enter 1/12 Y 0.0	0)	
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)	/) to Loan Source		ame of Employer		
Mailing Address		Oc	ccupation		
City State	ZIP Code	Gu	mount uaranteed utstanding:	y y	
2. Full Name (Last, First, Middle Initial)		Na	ame of Employer		
Mailing Address			ccupation mount		
City State	ZIP Code	Gu	uaranteed utstanding:	y	
3. Full Name (Last, First, Middle Initial)		Na	ame of Employer		
Mailing Address			ccupation		
City State	ZIP Code	Gu	nount uaranteed utstanding:	y	
4. Full Name (Last, First, Middle Initial)		Na	ame of Employer		
Mailing Address		Oc	ccupation		
City State	ZIP Code	Gu	mount uaranteed utstanding:	g 1 1 g 1 1 a 1	
SUBTOTALS This Period This Page (option	al)			, , , , , , , , , , , , , , , , , , , ,	
COTALS This Period (last page in this line of Carry outstanding balance only to LINE 3, 5				vard to appropriate line of Summary	

lage# 20210410044000400	•			r	
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) × 13a
AME OF COMMITTEE (In Coolidge For Cong	,			Transac	ction ID : SC/10.4143
LOAN SOURCE Full N Coolidge, Leslie,	•	ddle Initial)		☐ Memo Item	Election: 2012 X Primary General
Mailing Address 345 Old Sutton Road					Other (specify) ▼
City Barrington Hills		State IL	ZIP Code 60010	e	X Personal Funds of the Candidate
Original Amount of Lo	an	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
,	15900.95			0.00	15900.95
TERMS Date Inc	curred	[	Date Due	Interest Rate (If none, enter	
M03M / D07D /	<sup>ү</sup> Ž01Ž <sup>ү</sup>	M M / D D	/ Y 12	ý/31/12 <sup>v</sup>	00 % (apr) Yes X No
List All Endorsers or	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y x .
SUBTOTALS This Period					15900.95
Carry outstanding balanc	e only to LINE 3, Sch	nedule D, for thi	s line. If n	o Schedule D, carry forv	ward to appropriate line of Summary.

1490# 20210+100+1000+010					PAGE 12 OF 24
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s)       FOR LINE NUMBER:         for each category of the       check only one)         Detailed Summary Page       13	
AME OF COMMITTEE (In Full) Coolidge For Congress				Transa	ction ID : SC/10.4146
LOAN SOURCE Full Name (Last, Fire Coolidge, Leslie, , ,	st, Mide	dle Initial)		Memo Item	Election: 2012 Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Cod 60010	e	X Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To I	Date Bal	ance Outstanding at Close of This Perio
653.85	5			0.00	653.85
TERMS Date Incurred		D	ate Due	Interest Rat (If none, ente	
M03 <sup>M</sup> / D07 <sup>D</sup> / Y Ž012 Y	Ň	I M / D D	/ Y 12	2/31/12 <sup>Y</sup> 0	.00 % (apr) Yes X No
List All Endorsers or Guarantors (if	any) to	Loan Source			
1. Full Name (Last, First, Middle Initi	al)			Name of Employer	
Mailing Address				Occupation	
City Si	tate	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	al)			Name of Employer	
Mailing Address				Occupation	
City St	tate	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 m 1
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City St	tate	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initia	al)			Name of Employer	
Mailing Address				Occupation	
City	tate	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
SUBTOTALS This Period This Page (opt					653.85 7 7
Carry outstanding balance only to LINE					ward to approp

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th	
-			Detailed Summary Page	e (check only one) i loa 13b
ME OF COMMITTEE (In Full) coolidge For Congress			Transact	tion ID : SC/10.4144
LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)		Memo Item	Election: 2012
Coolidge, Leslie, , ,				Y Primary General
Mailing Address 345 Old Sutton Road				Other (specify) <b>v</b>
City	State	ZIP Code		
Barrington Hills	IL	60010		Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pag	yment To Da	ate Balar	nce Outstanding at Close of This Perio
6000.00		7	0.00	6000.00
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter	
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 09 <sup>D</sup> / <sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	/ Y 12/	31/ĭ2 <sup>×</sup> 0.0	
List All Endorsers or Guarantors (if any) to	o Loan Source			
1. Full Name (Last, First, Middle Initial)		٩	Name of Employer	
Mailing Address		C	Dccupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 y 1 y 1
2. Full Name (Last, First, Middle Initial)		٩	Name of Employer	
Mailing Address			Dccupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Last, First, Middle Initial)	-	٩	Name of Employer	
Mailing Address		C	Dccupation	
			Amount Guaranteed	
City State	ZIP Code		Dutstanding:	9 9 9 9 N
4. Full Name (Last, First, Middle Initial)		٩	Name of Employer	
Mailing Address		C	Dccupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line only				6000.00 7 7

lage# 20210410044000401	-				PAGE 14 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s)       FOR LINE NUMBER:         for each category of the       (check only one)         Detailed Summary Page       13	
AME OF COMMITTEE (In Coolidge For Cong	,			Transad	ction ID : SC/10.4145
LOAN SOURCE Full N Coolidge, Leslie,	•	ddle Initial)		☐ Memo Item	Election: 2012 Primary General
Mailing Address 345 Old Sutton Road					Other (specify) ▼
City Barrington Hills		State IL	ZIP Code 60010	e	Y Personal Funds of the Candidate
Original Amount of Lo	an	Cumulative Pa	lyment To D	Date Bala	ance Outstanding at Close of This Perio
	18861.70			0.00	18861.70
TERMS Date Inc	curred	[	Date Due	Interest Rate (If none, enter	
M03 <sup>M</sup> / D13 <sup>D</sup> /	<sup>ү</sup> Ž01Ž <sup>ү</sup>	M M / D D	9 / Y 12	ý/31/12 <sup>v</sup>	00 % (apr) Yes X No
List All Endorsers or	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, Fi	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9 9 9 9
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y x .
<b>CUBTOTALS</b> This Period					18861.70
Carry outstanding balanc	e only to LINE 3, Sch	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summary

1000-100-100-100-1000	4010				PAGE 15 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
ame of committee Coolidge For Cor	( )			Transac	ction ID : SC/10.4147
LOAN SOURCE FU	ull Name (Last, First, Mic e, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road					Other (specify) ▼
City Barrington Hills		State IL	ZIP Code 60010	9	Personal Funds of the Candidate
Original Amount of	Loan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
	2661.28	3		0.00	2661.28
TERMS Date	Incurred	[	Date Due	Interest Rate (If none, enter	
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 20 <sup>D</sup>	<sup>/</sup> <sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	/ Y 12	ý31/12 <sup>×</sup> 0.	00 % (apr) Yes X No
List All Endorsers	or Guarantors (if any) t	o Loan Source			
1. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last,	First, Middle Initial)	Ľ		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · ·
	od This Page (optional). ast page in this line only				2661.28
Carry outstanding bala	ance only to LINE 3, Sci	nedule D, for thi	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.

	-				PAGE 16 OF 24
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Coolidge For Congi	,			Transac	ction ID : SC/10.4148
LOAN SOURCE Full N Coolidge, Leslie,	•	Idle Initial)		🗌 Memo Item	Election: 2012 Primary General
Mailing Address 345 Old Sutton Road					Other (specify)
City Barrington Hills		State IL	ZIP Code 60010	e	Y Personal Funds of the Candidate
Original Amount of Loa	an 1000.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric 1000.00
TERMS         Date Inc           M04 <sup>M</sup> /         D03 <sup>D</sup> /	v žo1ž v	C	Date Due	Interest Rate (If none, enter ÿ31/12 Y	
List All Endorsers or ( 1. Full Name (Last, Fir		o Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
3. Full Name (Last, Firs	st, Middle Initial)	·		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g g
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period					1000.00
Carry outstanding balance	e only to LINE 3, Scł	edule D, for this	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) Coolidge For Congress		Transaction ID : SC/10.4149
LOAN SOURCE Full Name (Last, First, Coolidge, Leslie, , ,	Middle Initial)	Memo Item Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road		Other (specify)
City Barrington Hills	State IL	ZIP Code 60010
Original Amount of Loan 1652.64	Cumulative Pa	Image: memory of the second
TERMS     Date Incurred       M04 <sup>M</sup> /     D26 <sup>D</sup> /     Y     Ž01Ž     Y		ate Due Interest Rate Secured: (If none, enter 0) 0.00 % (apr) Yes X N
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation Amount
City State	e ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	l	Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	al)	1652.64
TOTALS This Period (last page in this line		s line. If no Schedule D, carry forward to appropriate line of Summary.

for each category of the Detailed Summary Page (che Transaction ID : Si Memo Item Election: Prima Gene Othe Unterest Rate (If none, enter 0) 31/12 V 0.00	2012 ary
Memo Item Election: Prime Gene Othe Othe Memo Item Election: Prime Served Othe Memo Item Prime Served Othe Person Amount Networks State (If none, enter 0) State Othe	2012 ary eral r (specify) ▼ sonal Funds of the Candidate anding at Close of This Perio 71.61 Secured:
Ame of Employer	ary eral r (specify) ▼ sonal Funds of the Candidate unding at Close of This Perio 71.61 Secured:
Ate Balance Outsta Othe Othe Othe Othe Othe Othe Othe Othe	r (specify) ▼ sonal Funds of the Candidate unding at Close of This Perio 71.61 Secured:
Ate Balance Outsta	nding at Close of This Perio 71.61 Secured:
0.00 Interest Rate (If none, enter 0) 31/12 0.00 % Name of Employer Occupation	71.61 Secured:
0.00 Interest Rate (If none, enter 0) 31/12 0.00 % Name of Employer Occupation	71.61 Secured:
(If none, enter 0) 31/12 Y 0.00 % Name of Employer Doccupation	
Name of Employer	o (apr) Yes X No
Decupation	
Decupation	
Amount	
Dutstanding:	g 1 1 g 1
lame of Employer	
Decupation	
Amount Guaranteed Dutstanding:	
lame of Employer	
Dccupation	
Amount Guaranteed Dutstanding:	
lame of Employer	
Occupation	
Amount Guaranteed Dutstanding:	y
• • • • • • • • • • • • • • • • • • •	71.61
	Guaranteed Dutstanding: , , , , , , , , , , , , , , , , , , ,

lage# 202104100440004011				PAGE 19 OF 24
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page       FOR LINE NUMBER: (check only one)	
AME OF COMMITTEE (In Full) Coolidge For Congress			Transactio	on ID : SC/10.4132
LOAN SOURCE Full Name (Last, First, Coolidge, Leslie, , ,	Middle Initial)		Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road				Other (specify)
City Barrington Hills	State IL	ZIP Code 60010		Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date	Balanc	ce Outstanding at Close of This Perio
439.77	2	0	.00	439.77
TERMS Date Incurred	[	Date Due	Interest Rate (If none, enter 0)	) Secured:
M 10 <sup>M</sup> / D 19 <sup>D</sup> / Y Ž012 Y	M M / D D	′ <sup>×</sup> 12/31/12 <sup>×</sup>	0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of	Employer	
Mailing Address		Occupatio	n	
City State	e ZIP Code	Amount Guarantee Outstandi		y
2. Full Name (Last, First, Middle Initial)		Name of	Employer	
Mailing Address		Occupatic	n	
City State	e ZIP Code	Amount Guarantee Outstandi		y 1 y 1 w 1
3. Full Name (Last, First, Middle Initial)			Employer	
Mailing Address		Occupatio	pn	
City State	State ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	ł	Name of	Employer	
Mailing Address		Occupatio	n	
City State	e ZIP Code	Amount Guarantee Outstandi		y 1 y 1 x 1
SUBTOTALS This Period This Page (option				439.77 7 7
Carry outstanding balance only to LINE 3,				rd to appropria

lage# 20210+100+1000+010	0			<b></b>	PAGE 20 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s)       FOR LINE NUMBER:         for each category of the       (check only one)         Detailed Summary Page       X	
AME OF COMMITTEE (In Coolidge For Congr	,			Transac	ction ID : SC/10.4150
LOAN SOURCE Full N Coolidge, Leslie,	•	Idle Initial)		🗌 Memo Item	Election: 2012 Primary K General
Mailing Address 345 Old Sutton Road					Other (specify) <b>v</b>
City Barrington Hills		State IL	ZIP Code 60010	e	Personal Funds of the Candidate
Original Amount of Loa	an	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
<u> </u>	12000.00	2		0.00	12000.00
TERMS Date Inc	urred	[	Date Due	Interest Rate (If none, enter	
M10 <sup>M</sup> / D19 <sup>D</sup> /	ΥŽ01Ž Υ	M M / D D	0 / Y 12	∛31/12 <sup>×</sup> 0.	.00 % (apr) Yes X No
List All Endorsers or C	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, Fire	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, Firs	t, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
SUBTOTALS This Period <sup>-</sup>	,				12000.00
Carry outstanding balance	e only to LINE 3, Sch	edule D, for thi	is line. If n	o Schedule D, carry forv	ward to appropriate line of Summary

Use separate schedule(s) for each category of the Detailed Summary Page       FOR LINE NUMBER: (check only one)       13a         Transaction ID : SC/10.4135         Image: Schedule (s) for each category of the Detailed Summary Page       Primary         Image: Schedule (s) for each category of the Detailed Summary Page       Image: Schedule (s) for each category of the Detailed Summary Page         Image: Schedule (s) for each category of the Detailed Summary Page       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         Image: Schedule (s) for each category of the Detailed Summary Page       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         Image: Schedule (s) for each category of the Detailed Summary Page       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         IP Code       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         IP Code       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         IP Code       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)         IP Code       Image: Schedule (s) for each category one)       Image: Schedule (s) for each category one)       Image: Schedule (s) for each cate		
Memo Item       Election: 2012         Primary       General         Other (specify) ▼         IP Code         60010       ▼ Personal Funds of the Candidate         ent To Date       Balance Outstanding at Close of This Perior         0.00       32161.19         e Due       Interest Rate (If none, enter 0)         ✓ 12/31/12 ×       0.00         % (apr)       Yes × No		
Primary General Other (specify) ▼ IP Code 60010  IP Code 6000  IP Code 60010  IP Code 6000 IP Code		
IP Code 60010   Personal Funds of the Candidate  ent To Date Balance Outstanding at Close of This Perio 0.00 32161.19  Due Interest Rate (If none, enter 0)  12/31/12 0.00 % (apr) Yes No		
60010       Image: Personal Funds of the Candidate         ent To Date       Balance Outstanding at Close of This Perior         0.00       32161.19         2       2         2       0.00         32161.19       32161.19         2       2         4       12/31/12         1       0.00         % (apr)       Yes         Yes       No		
0.00 32161.19 e Due Interest Rate Secured: (If none, enter 0) y 12/31/12 Y 0.00 % (apr) Yes X No		
e Due Interest Rate (If none, enter 0) V Y 12/31/12 Y 0.00 % (apr) Yes X No		
(If none, enter 0) √ ¥ 12/31/12 ¥ 0.00 % (apr) Yes ★ No		
√ ¥ 12/31/12 ¥ 0.00 % (apr) Yes ★ No		
Name of Employer		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
32161.19		

	(FEC Form 3)			Use separate schedule for each category of th	
DANS				Detailed Summary Pag	
ame of committ Coolidge For C	· · · ·			Transac	ction ID : SC/10.4134
LOAN SOURCE Coolidge, Le	Full Name (Last, First, Mic Slie, , ,	ddle Initial)		🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Ro	ad				Other (specify)
City		State	ZIP Code	9	✗ Personal Funds of the Candidate
Barrington Hills IL 60010					
Original Amount	e of Loan 6000.00	Cumulative Pay	yment To D	Date Bala	ance Outstanding at Close of This Perio
TERMS D	ate Incurred	C	Date Due	Interest Rate	
<sup>M</sup> 11 <sup>M</sup> / <sup>D</sup> 0	2 <sup>D</sup> <sup>/</sup> <sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	/ Y 12	(If none, enter )/31/12 Y 0.	
List All Endorse	rs or Guarantors (if any) t	o Loan Source	T		
1. Full Name (La	ast, First, Middle Initial)			Name of Employer	
Mailing Addre	ess			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (La	st, First, Middle Initial)			Name of Employer	
Mailing Addres	55			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (La	st, First, Middle Initial)			Name of Employer	
Mailing Addres	SS			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (La	st, First, Middle Initial)			Name of Employer	
Mailing Addres	SS			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 8 1
<b>UBTOTALS</b> This F	Period This Page (optional).			······	6000.00
OTALS This Period	d (last page in this line only	/)		······	
Carry outstanding I	palance only to LINE 3, Sch	nedule D, for this	s line. If n	o Schedule D, carry forv	vard to appropriate line of Summa

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) Coolidge For Congress			Transac	ction ID : SC/10.4130	
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	Idle Initial)		☐ Memo Item	Election: 2012 Primary K General	
Mailing Address 345 Old Sutton Road				Other (specify) ▼	
City Barrington Hills	State IL	ZIP Code 60010		Y Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pag	yment To Da	ate Bala	ance Outstanding at Close of This Period	
1780.84		7	0.00	1780.84	
TERMS Date Incurred	D	Date Due	Interest Rate (If none, enter		
M11M / D06D / Y Ž01Ž Y	M M / D D	/ <sup>Y</sup> 12);	31/12 <sup>Y</sup> 0.	00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		lame of Employer		
Mailing Address					
City State	ZIP Code	G	Amount Guaranteed Dutstanding:	y y	
2. Full Name (Last, First, Middle Initial)		N	lame of Employer		
Mailing Address			Dccupation		
City State	ZIP Code	G	Amount Guaranteed Dutstanding:	y y y y	
3. Full Name (Last, First, Middle Initial)		N	lame of Employer		
Mailing Address		C	Decupation		
City State	ZIP Code	G	Amount Guaranteed Dutstanding:	y	
4. Full Name (Last, First, Middle Initial)		N	lame of Employer		
Mailing Address		C	Dccupation		
City State	ZIP Code	G	Amount Guaranteed Dutstanding:	y	
UBTOTALS This Period This Page (optional)	)		······	1780.84	

1090# 20210+100+4000+022					PAGE 24 OF 24
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Coolidge For Congr	,			Transac	ction ID : SC/10.4164
LOAN SOURCE Full Name (Last, First, Middle Initial) Coolidge, Leslie, , ,				🗌 Memo Item	Election: 2012 Primary X General
Mailing Address 345 Old Sutton Road					Other (specify) ▼
City Barrington Hills		State IL	ZIP Code 60010		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Payment To Date		Date Bala	ance Outstanding at Close of This Peric
,	30.00			0.00	30.00
TERMS Date Inc.	urred	E	Date Due	Interest Rate (If none, enter	
M12 <sup>M</sup> / D01 <sup>D</sup> /	<sup>ү</sup> Ž01Ž <sup>ү</sup>	M M / D D	/ Y 12	ў́31/12 <sup>×</sup> 0.	00 % (apr) Yes X No
List All Endorsers or G	Guarantors (if any) to	b Loan Source			
1. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	
2. Full Name (Last, First	, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period T					30.00 7 143008.02
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forv	vard to appropriate line of Summary.