

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

Rohl for Congress

ADDRESS (number and street)

3735 E. 1453rd Rd.

Check if different than previously reported. (ACC)

Ottawa

IL

61350

2. FEC IDENTIFICATION NUMBER ▼

C C00521500

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IL

16

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 11 / 06 / 2012 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

10 / 01 / 2012 through 10 / 17 / 2012

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 Tom Ganiere

Signature of Treasurer Tom Ganiere

[Electronically Filed]

Date

11 / 30 / 2012

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Rohl for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6061.48	34520.37
(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)).....	6061.48	34520.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4667.50	21908.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4667.50	21908.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12611.78	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

Rohl for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2277.00	15534.70
(ii) Unitemized.....	3784.48	17535.67
(iii) TOTAL of contributions from individuals ▶	6061.48	33070.37
(b) Political Party Committees.....	0.00	1450.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6061.48	34520.37
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	0.00
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)..... ▶	6061.48	34520.37

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4667.50	21908.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4667.50	21908.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11217.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6061.48
25. SUBTOTAL (add Line 23 and Line 24).....	17279.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4667.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12611.78

**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 12
	<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)
Rohl for Congress

A. Full Name (Last, First, Middle Initial)
Susan Barlow

Mailing Address 114 Countryside Ave.

City Ottawa	State IL	Zip Code 61350
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ottawa Township High School	Occupation Adminstration staff
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2012

Transaction ID : SA11AI.4973

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Byron Hyink

Mailing Address 2876 Cole Ln.

City New Lenox	State IL	Zip Code 60451
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FEC ID number of contributing federal political committee. **C**

Name of Employer Not employed	Occupation
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2012

Transaction ID : SA11AI.5088

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Illinois Valley Democratic Women

Mailing Address PO Box 1395

City LaSalle	State IL	Zip Code 61301
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2012

Transaction ID : SA11AI.4964

Amount of Each Receipt this Period
250.00

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 6 OF 12
	<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)
Rohl for Congress

A. Full Name (Last, First, Middle Initial)
Dan Kenny

Mailing Address 303 Birchwood Ln.

City State Zip Code
Dekalb IL 60115

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

Name of Employer Occupation
Dekalb School District 428 Educator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
628.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : SA11AI.5034

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Julie Kiefer-Bell

Mailing Address 107 Mattek Ave.

City State Zip Code
Dekalb IL 60115

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : SA11AI.5054

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Douglas Moore

Mailing Address 541 Cloverlane Dr.

City State Zip Code
Sycamore IL 60178

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

Name of Employer Occupation
Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2012

Transaction ID : SA11AI.5095

Amount of Each Receipt this Period
500.00

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

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NAME OF COMMITTEE (In Full)
Rohl for Congress

A. Full Name (Last, First, Middle Initial)
Douglas Moore

Mailing Address 541 Cloverlane Dr.

City Sycamore	State IL	Zip Code 60178
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		11		2012

Transaction ID : SA11AI.5047

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
William Moore

Mailing Address 119 Windsor Dr.

City Dekalb	State IL	Zip Code 60115
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
924.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		11		2012

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period
200.00

In-kind - refreshments for fund raiser 10/11/12 dekalb

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

Mailing Address 119 Windsor Dr.

City Dekalb	State IL	Zip Code 60115
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1124.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		13		2012

Transaction ID : SA11AI.5110

Amount of Each Receipt this Period
200.00

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

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

500.00

**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 12
	<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)
Rohl for Congress

Full Name (Last, First, Middle Initial) A. Donations Small		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012
Mailing Address _____ City State Zip Code		Transaction ID : SA11AI.5003
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation _____		Amount of Each Receipt this Period _____ 130.00 Kim meet and greet
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 365.00

Full Name (Last, First, Middle Initial) B. Donations Small		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2012
Mailing Address _____ City State Zip Code		Transaction ID : SA11AI.5060
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation _____		Amount of Each Receipt this Period _____ 142.00 Simon event
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 507.00

Full Name (Last, First, Middle Initial) C. Donations Small		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 12 / 2012
Mailing Address _____ City State Zip Code		Transaction ID : SA11AI.5002
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation _____		Amount of Each Receipt this Period _____ 80.00 Pig roast event small donations
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 587.00

SUBTOTAL of Receipts This Page (optional).....	_____ 352.00
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: (check only one)	PAGE 9 OF 12
	<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)
Rohl for Congress

A. Full Name (Last, First, Middle Initial)
Mary Steinhaus

Mailing Address 214 McKinley #9

City Imperial State TX Zip Code 79743

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

Name of Employer None Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2012

Transaction ID : SA11AI.5142

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Priscilla Voss

Mailing Address 136 Ilehamwood Dr.

City Dekalb State IL Zip Code 60115

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2012

Transaction ID : SA11AI.5026

Amount of Each Receipt this Period
 25.00

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).....

125.00

2277.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 12	
	<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)
Rohl for Congress

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2012
Mailing Address 14 Arrow St. Ste. 11		Amount of Each Disbursement this Period 24.59
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement	Transaction ID : SB17.5148
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 14 Arrow St. Ste. 11		Amount of Each Disbursement this Period 3.57
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement	Transaction ID : SB17.5149
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Fast Print		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 726 LaSalle St.		Amount of Each Disbursement this Period 500.00
City Ottawa	State IL	
Zip Code 61350	Purpose of Disbursement Flyer printing - foreclosure	Transaction ID : SB17.5121
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	528.16
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 11 OF 12			
	<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)
Rohl for Congress

Full Name (Last, First, Middle Initial) A. Rich Gallati		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 2397 Alpha Court W.		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5175
City Dekalb	State IL	
Purpose of Disbursement phone bank operations	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. William Moore		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2012
Mailing Address 119 Windsor Dr.		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5120
City Dekalb	State IL	
Purpose of Disbursement In-kind - refreshments for fund raiser 10/11/12 dekalb	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Visa		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address PO Box 4521		Amount of Each Disbursement this Period 1912.17 Transaction ID : SB17.5170
City Carol Stream	State IL	
Purpose of Disbursement palm cards - Hotcards.com	Candidate Name	Category/ Type 006
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2412.17
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 12 OF 12	
	<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)
Rohl for Congress

Full Name (Last, First, Middle Initial) A. Visa		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address PO Box 4521		Amount of Each Disbursement this Period 25.32
City Carol Stream	State IL	
Zip Code 60197	Category/ Type 001	Transaction ID : SB17.5171
Purpose of Disbursement campaign phone		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Robert Whitmer		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 1151 Tyler Rd.		Amount of Each Disbursement this Period 680.00
City Plano	State IL	
Zip Code 60545	Category/ Type 003	Transaction ID : SB17.5166
Purpose of Disbursement Hog preparation for hog roast fund raiser		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Elizabeth Wilke		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 1939 Indian Hill Ln.		Amount of Each Disbursement this Period 838.75
City Aurora	State IL	
Zip Code 60503	Category/ Type 001	Transaction ID : SB17.5172
Purpose of Disbursement campaign manager travel exp.		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1544.07
TOTAL This Period (last page this line number only).....	4484.40