07/15/2016 18 : 13

(Revised 02/2003)

PAGE 1 / 24

FEC FORM 3	AND DI	T OF RE SBURSE Authorized Co	EMENTS			Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRI full)	NT 🔻	Example: If typir over the lines.	ig, type	12FE4M5	
Coolidge For C	Congress					
ADDRESS (number ar	nd street)	on Road				
Check if dif than previo reported. (A	usly Barrington					60010
2. <b>FEC IDENTIFIC</b>		CITY 3. IS THIS REPORT	× NEW (N)		STATE AMENE (A)	ZIP CODE STATE ▼ DISTRICT
(a) Quarterly R	5 Quarterly Report (Q1)	(b) 12-Day <b>P</b>	<b>RE</b> -Election Repo Primary (12P Convention (	)	General (1 Special (1	
	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election	on	D D /	Y Y Y Y	in the State of
January	/ 31 Year-End Report (YE)	(c) 30-Day <b>P</b>	OST-Election Re	port for the:	1	
Termina	ation Report (TER)	Election	General (300	<b>a)</b>	Runoff (30	DR) Special (30S) in the State of
5. Covering Period	M M / D D O1	/ Y Y Y Y 2016	through	M M 06		2016
Type or Print Name			niowieuge and	Dener it is tru	ue, correct and	a complete.
Signature of Treasure	er Leslie Coolidge		[Electronically	Filed] D	Date	/ D D / Y Y Y Y 15 / 2016
NOTE: Submission of Office Use	false, erroneous, or incomp	blete information m	ay subject the per	rson signing t	his Report to th	he penalties of 2 U.S.C. §437g.

Only

SUMMARY PAGE f D d Dich . into

		FEC Form 3 (Revised 02/2003)	of Receipts and Disbursements	PAGE 2 / 24
		or Type Committee Name lidge For Congress		
R	eport	Covering the Period: From:	04 / D D / Y Y Y Y 2016 To:	M 06 / D 0 / Y Y Y Y 2016
			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))	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
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	104.59
8.		h on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on redule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on redule 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	ETAILED SUMMARY PAGE	7						
FEC Form 3 (Revised 12/2003) of Receipts PAGE 3 /									
	/rite or Type Committee Name								
(	Coolidge For Congress								
R	eport Covering the Period: From: 04	To:	M M / D D / Y Y Y Y 06 30 2016						
	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	0.00	0.00						
	(i) Itemized (use Schedule A)								
	(ii) Unitemized	0.00	0.00						
	(iii) TOTAL of contributions from individuals	0.00	0.00						
	(b) Balitical Barty Committees	0.00	0.00						
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>								
	(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))	0.00	0.00						
12	TRANSFERS FROM OTHER								
12.	AUTHORIZED COMMITTEES	0.00	0.00						
13.	LOANS:								
	(a) Made or Guaranteed by the	0.00	0.00						
	Candidate		0.00						
	(b) All Other Loans	0.00	0.00						
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00						
			7 7 7						
14.	OFFSETS TO OPERATING EXPENDITURES								
	(Refunds, Rebates, etc.)	0.00	15.41						
15.	OTHER RECEIPTS								
	(Dividends, Interest, etc.)	0.00	0.00						
16.	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15)								
	(Carry Total to Line 24, page 4)	0.00	15.41						

Image# 201607159020610648

of Disbursements FEC Form 3 (Revised 02/2003) 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)

## **III. CASH SUMMARY**

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7		0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7		0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7		0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		7		0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7		0.00

## Image# 201607159020610649

## **DETAILED SUMMARY PAGE**

PAGE 4 / 24

		PAGE 5 OF 24
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		Transaction ID : SC/10.4139
LOAN SOURCE Full Name (Last, First, Mi Leslie Coolidge	ddle Initial) <b>'PERSONAL FU</b>	INDS] Memo Item Election: 2012 Primary General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State ZIP Co	de
Barrington Hills	IL 60010	
Original Amount of Loan	Cumulative Payment To	Date Balance Outstanding at Close of This Perio
TERMS Date Incurred	Date Due	Interact Data Secured
	M M / D D / Y	Ž/31/12     O.00     % (apr)     Yes     No
List All Endorsers or Guarantors (if any)	to 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:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		12040.04
TOTALS This Period (last page in this line onl		no Schedule D, carry forward to appropriate line of Summary.

CHEDULE C (FEC Form 3)			PAGE 6 OF 24
OANS		Use separate schedule( for each category of the Detailed Summary Page	e (check only one) X 13a
IAME OF COMMITTEE (In Full) Coolidge For Congress		Transact	ion ID : SC/10.4138
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial) <b>'PERSONAL FU</b>	NDS] Memo Item	Election: 2012
Leslie Coolidge			Primary General
Mailing Address 345 Old Sutton Road			Other (specify)
City	State ZIP Cod	le	
Barrington Hills	IL 60010		
Original Amount of Loan	Cumulative Payment To I	Date Balar	nce Outstanding at Close of This Period
100.00		0.00	100.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 08 / Y Ž011 Y	M M / D D / Y 12	2/31/12 <sup>×</sup> 0.00	° (apr) □ Yes 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 y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
SUBTOTALS This Period This Page (optional).			100.00 7 7 7

· •						PAGE 7 OF 24
HEDULE C (FEC For ANS	m 3)			Use separate scheo for each category o Detailed Summary I	of the	FOR LINE NUMBER: (check only one) X 13a 13b
ME OF COMMITTEE (In Full)				Trans	saction	ID : SC/10.4137
LOAN SOURCE Full Name (La	st, First, Mic	dle Initial) <b>PE</b>	RSONAL FUI	IDS] Memo Item	Ele	ction: 2012
Leslie Coolidge					X	Primary General
Mailing Address 345 Old Sutton Road						Other (specify) 🔻
City		State	ZIP Code	Э		
Barrington Hills		IL	60010			
Original Amount of Loan		Cumulative	Payment To D	Pate B	alance (	Outstanding at Close of This Perio
<u> </u>	500.00		77_	0.00		500.00
TERMS Date Incurred			Date Due	Interest F	late	Secured:
<sup>M</sup> 12 <sup>M</sup> / <sup>D</sup> 15 <sup>D</sup> / <sup>Y</sup> Ž0	IŤ Y	M M / D	D / Y 12	/31/12 <sup>Y</sup>	0.00	% (apr)
List All Endorsers or Guaranto	ors (if any) t	o Loan Sourd	ce			
1. Full Name (Last, First, Midd	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · · ·
2. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	y
4. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
UBTOTALS This Period This Pag OTALS This Period (last page in						500.00

ge# 201001100020010000				
HEDULE C (FEC Form ANS	3)			Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full) oolidge For Congress				Transaction ID : SC/10.4142
LOAN SOURCE Full Name (Last,	First, Mido	dle Initial) <b>PER</b>	SONAL FUN	IDS] Memo Item Election: 2012
Leslie Coolidge				Primary General
Mailing Address 345 Old Sutton Road				Other (specify) v
City	:	State	ZIP Code	3
Barrington Hills		IL	60010	
Original Amount of Loan		Cumulative Pa	ayment To D	Balance Outstanding at Close of This Per
5154	.15		7	0.00 5154.15
TERMS Date Incurred		[	Date Due	Interest Rate Secured:
M01 <sup>M</sup> / D02 <sup>D</sup> / Y Ž01Ž	Y	M / D D	<sup>7</sup> 12	√31/12 <sup>×</sup> 0.00 % (apr)
List All Endorsers or Guarantors	(if any) to	Loan Source	!	
1. Full Name (Last, First, Middle Ir	nitial)			Name of Employer
Mailing Address				Occupation
				Amount
City	State	ZIP Code		Guaranteed Outstanding:
2. Full Name (Last, First, Middle Ini	itial)			Name of Employer
Mailing Address				Occupation
				Amount Guaranteed
City	State	ZIP Code		Outstanding:
3. Full Name (Last, First, Middle Ini	itial)			Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed
Olly	State	ZIF COUE		Outstanding:
4. Full Name (Last, First, Middle Ini	itial)			Name of Employer
Mailing Address				Occupation
City	State	ZIP Code		Amount Guaranteed Outstanding:
JBTOTALS This Period This Page (c				

		PAGE 9 OF 24
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/10.4141
LOAN SOURCE Full Name (Last, First, I Leslie Coolidge	Middle Initial) <b>PERSONAL F</b>	UNDS] Memo Item Election: 2012 Primary General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State ZIP Co	ode
Barrington Hills	IL 60010	
Original Amount of Loan	Cumulative Payment To	Date     Balance Outstanding at Close of This Perio       0.00     11000.00
TERMS	Data Data	Island Dela
Date Incurred		Interest Rate     Secured:       12/31/12     0.00       % (apr)     Yes
List All Endorsers or Guarantors (if any	) to 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:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona		
<b>OTALS</b> This Period (last page in this line c Carry outstanding balance only to LINE 3, 5		no Schedule D, carry forward to appropriate line of Summary.

						PAGE 10 OF 2
CHEDULE C (FEC DANS	Form 3)			Use separate sche for each category Detailed Summary	of the	FOR LINE NUMBER: (check only one)
AME OF COMMITTEE (In Ful Coolidge For Congres				Tra	nsaction	ID : SC/10.4140
LOAN SOURCE Full Nam	e (Last, First, Mi	ddle Initial) <b>PERSO</b>	NAL FUN	IDS] Memo Item	Ele	ection: 2012
Leslie Coolidge						Primary General
Mailing Address 345 Old Sutton Road						Other (specify)
City		State 2	ZIP Code	9		
Barrington Hills		IL	60010			
Original Amount of Loan		Cumulative Paym	nent To D	ate	Balance	Outstanding at Close of This Per
<u> </u>	15000.00			0.00		15000.00
TERMS Date Incurre	ed	Dat	te Due	Interest	Rate	Secured:
M02 <sup>M</sup> / D26 <sup>D</sup> / Y	žo1ž <sup>v</sup>	M M / D D		/31/12 <sup>Y</sup>	0.00	% (apr)
List All Endorsers or Gua		o 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, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed		
	4:-I-II- I-:+:-I\			Outstanding:	, ,	,
4. Full Name (Last, First, N	nuule milial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · ·
UBTOTALS This Period This						7 7

-		PAGE 11 OF 24
CHEDULE C (FEC Form 3 DANS	3)	Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4143
LOAN SOURCE Full Name (Last, F	irst, Middle Initial) 'PERSOI	IAL FUNDS] Memo Item Election: 2012
Leslie Coolidge		Primary General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State Z	IP Code
Barrington Hills	IL 6	0010
Original Amount of Loan	Cumulative Paym	ent To Date Balance Outstanding at Close of This Perio
15900.9	95	0.00 15900.95
TERMS Date Incurred	Date	Due Interest Rate Secured:
M 03 / D 07 / Y Ž01Ž	Y M M / D D	0.00 % (apr)
List All Endorsers or Guarantors (it	f any) to Loan Source	
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initi	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initi	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initi	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (op OTALS This Period (last page in this I		

<b>3</b>						PAGE 12	OF 2
CHEDULE C (FEC For DANS	rm 3)			Use separate sched for each category o Detailed Summary F	f the	FOR LINE NUMBER: (check only one)	× 13
AME OF COMMITTEE (In Full)				Trans	action	ID : SC/10.4146	
LOAN SOURCE Full Name (L	ast, First, Mic	ddle Initial) <b>'PEI</b>	RSONAL FUN	IDS] Memo Item	Ele	ction: 2012	
Leslie Coolidge				-	X	Primary General	
Mailing Address 345 Old Sutton Road						Other (specify)	
City		State	ZIP Code	9			
Barrington Hills		IL	60010				
Original Amount of Loan		Cumulative F	Payment To D	Pate B	alance (	Outstanding at Close of	This Pe
<u> </u>	653.85			0.00		6	53.85
TERMS Date Incurred			Date Due	Interest R	ate	Secur	ed:
M03 / D07 / Y Ž	)1Ž <sup>Y</sup>	M M / D	D / Y 12	/31/12 <sup>Y</sup>	0.00	% (apr)	
List All Endorsers or Guarant		o Loan Sourc					
1. Full Name (Last, First, Mide	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · ·	
2. Full Name (Last, First, Midd	le Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 7		
3. Full Name (Last, First, Midd	le Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · ·	
4. Full Name (Last, First, Midd	le Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 7	y	
<b>UBTOTALS</b> This Period This Pa <b>OTALS</b> This Period (last page in							53.85

		PAGE 13 OF 24
CHEDULE C (FEC Form 3 DANS	3)	Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) Coolidge For Congress		Transaction ID : SC/10.4144
LOAN SOURCE Full Name (Last, F Leslie Coolidge	irst, Middle Initial) <b>PERSONAL</b>	FUNDS] Memo Item Election: 2012
Mailing Address 345 Old Sutton Road		Other (specify)
City	State ZIP (	Code
Barrington Hills	IL 6001	0
Original Amount of Loan 6000.0	Cumulative Payment	To Date Balance Outstanding at Close of This Perio
TERMS Date Incurred	Date Du	le Interest Rate Secured:
M <sub>03</sub> M / D <sub>09</sub> D / Y Ž01Ž	Y M M / D D /	<sup>×</sup> 12/31/12 <sup>×</sup> 0.00 % (apr)
List All Endorsers or Guarantors (i	f any) to Loan Source	
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Init	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Init	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Init	al)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
<b>SUBTOTALS</b> This Period This Page (or	otional)	6000.00
<b>TOTALS</b> This Period (last page in this	ine only)	
Carry outstanding balance only to LIN	E 3, Schedule D, for this line.	If no Schedule D, carry forward to appropriate line of Summary.

-						PAGE 14 OF 24
CHEDULE C (FEC Form	3)			Use separate schedu for each category of Detailed Summary P	the	FOR LINE NUMBER: (check only one) X 13a 13b
ME OF COMMITTEE (In Full)				Trans	action I	D : SC/10.4145
LOAN SOURCE Full Name (Last,	First, Mic	Idle Initial) <b>PE</b>	RSONAL FUN	DS] Memo Item	Elec	ction: 2012
Leslie Coolidge					X	Primary General
Mailing Address 345 Old Sutton Road						Other (specify)
City		State	ZIP Code	•		
Barrington Hills		IL	60010			
Original Amount of Loan		Cumulative F	Payment To D	ate Ba	alance (	Outstanding at Close of This Perio
18861	1.70			0.00		18861.70
TERMS Date Incurred			Date Due	Interest Ra	ate	Secured:
M03 / D13 / Y Ž01Ž	Y	M M / D	D / Y 12	/31/12 <sup>×</sup>	0.00	% (apr)
List All Endorsers or Guarantors	(if any) t	o Loan Sourc				
1. Full Name (Last, First, Middle I	nitial)		1	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	,	· · · · · · · ·
2. Full Name (Last, First, Middle In	nitial)		1	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	· · · · · · · ·
3. Full Name (Last, First, Middle In	nitial)		1	Name of Employer		
Mailing Address			(	Occupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7	· · · · · · · · ·
4. Full Name (Last, First, Middle In	nitial)		1	Name of Employer		
Mailing Address			(	Occupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7	· · · · · · · ·
UBTOTALS This Period This Page (						18861.70

-			1			PAGE	15	OF 24
CHEDULE C (FEC Form	3)			Use separate schedu for each category of Detailed Summary Pa	the (ch	R LINE NUME eck only one)		X 13a
ME OF COMMITTEE (In Full)				Transa	ction ID : S	C/10.4147		
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial) <b>PER</b>	SONAL FUN	DSJ Memo Item	Election:	2012		
Leslie Coolidge					Prim			
Mailing Address 345 Old Sutton Road						er (specify) 🔻		
City		State	ZIP Code	,				
Barrington Hills		IL	60010					
Original Amount of Loan		Cumulative Pa	ayment To D	ate Bal	ance Outsta	anding at Clos	se of T	his Perio
2661	.28			0.00		7	266 <sup>-</sup>	1.28
TERMS Date Incurred			Date Due	Interest Rat	te	S	ecured	J:
<sup>M</sup> 03 <sup>M</sup> / <sup>D</sup> 20 <sup>D</sup> / <sup>Y</sup> Ž01Ž	Y	M M / D	D / Y 12/	31/12 <sup>Y</sup> 0	.00 %	<b>%</b> (apr)	Yes	
List All Endorsers or Guarantors	(if any) t	o Loan Source	<del>;</del>					
1. Full Name (Last, First, Middle I	nitial)		1	Name of Employer				
Mailing Address			(	Dccupation				
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	7	* *	
2. Full Name (Last, First, Middle In	itial)		1	Name of Employer				
Mailing Address			(	Dccupation				
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	9	9		
3. Full Name (Last, First, Middle In	itial)		1	Name of Employer				
Mailing Address			(	Occupation				
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7			
4. Full Name (Last, First, Middle In	itial)		1	Name of Employer				
Mailing Address			(	Dccupation				
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7	7		
UBTOTALS This Period This Page ( OTALS This Period (last page in this					· · · · ·		2661	.28

			PAGE 16 OF 24
SCHEDULE C (FEC Form 3) OANS		Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER:
NAME OF COMMITTEE (In Full) Coolidge For Congress		Transactio	on ID : SC/10.4148
LOAN SOURCE Full Name (Last, First, M	iddle Initial) <b>PERSONAL FU</b>	NDS] Memo Item	Election: 2012
Leslie Coolidge			Primary X General
Mailing Address 345 Old Sutton Road			Other (specify) <b>v</b>
City	State ZIP Cod	le	
Barrington Hills	IL 60010		
Original Amount of Loan	Cumulative Payment To I	Date Balanc	ce Outstanding at Close of This Period
1000.00		0.00	1000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M04 <sup>M</sup> / D03 <sup>D</sup> / Y Ž012 <sup>Y</sup> Y	M M / D D / Y	2/31/12 <sup>Y</sup>	₩ (apr) W <sub>Yes</sub> No
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 y 1
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
SUBTOTALS This Period This Page (optional)	·		1000.00 7 7 7

5						PAGE 17	OF	24
CHEDULE C (FEC For DANS	m 3)			Use separate scheo for each category c Detailed Summary I	of the	FOR LINE NUMBER (check only one)	:	
AME OF COMMITTEE (In Full) Coolidge For Congress				Trans	saction	D : SC/10.4149		
LOAN SOURCE Full Name (La	st, First, Mic	ddle Initial) <b>PE</b>	RSONAL FUN	IDS] Memo Item	Ele	ction: 2012		
Leslie Coolidge					×	Primary General		
Mailing Address 345 Old Sutton Road						Other (specify)		
City		State	ZIP Code	9	I			
Barrington Hills		IL	60010					
Original Amount of Loan		Cumulative F	Payment To D	Date E	alance (	Outstanding at Close c	f This Pe	rio
1	652.64	,		0.00		1	652.64	
TERMS Date Incurred			Date Due	Interest F	late	Secu	ired:	
M04 / D26 / Y Ž0	1Ž Y	M M / D	D / Y 12	/31/12 <sup>Y</sup>	0.00	% (apr)	Yes	No
List All Endorsers or Guaranto		o Loan Sourc						
1. Full Name (Last, First, Midd	le Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle	e Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle	e Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	· · · · · · · ·		
4. Full Name (Last, First, Middle	e Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
UBTOTALS This Period This Pag						7 7 7 1	652.64	

<b>3</b>						PAGE 18	OF 24
CHEDULE C (FEC For DANS	m 3)			Use separate sched for each category of Detailed Summary F	fthe	FOR LINE NUMBER: (check only one)	
AME OF COMMITTEE (In Full)				Trans	action I	D : SC/10.4136	
LOAN SOURCE Full Name (La	st, First, Mic	Idle Initial) <b>PE</b>	RSONAL FUN	IDS] Memo Item	Eleo	ction: 2012	
Leslie Coolidge						Primary	
Mailing Address 345 Old Sutton Road						General Other (specify) ▼	
City		State	ZIP Code	9			
Barrington Hills		IL	60010				
Original Amount of Loan		Cumulative F	Payment To D	Date Ba	alance (	Outstanding at Close o	f This Peri
	71.61			0.00		2 2	71.61
TERMS Date Incurred			Date Due	Interest R	ate	Secu	red:
M 10 / D 01 / Y 20	1Ž <sup>Y</sup>	M M / D	_	ý/31/12 <sup>v</sup>	0.00	% (apr)	
List All Endorsers or Guaranto	ors (if any) t	o Loan Sourc	e				
1. Full Name (Last, First, Midd	le Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		· · · · · · ·	
2. Full Name (Last, First, Middle	e Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7		
3. Full Name (Last, First, Middle	e Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	- 9		
4. Full Name (Last, First, Middle	e Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9		
UBTOTALS This Period This Pag OTALS This Period (last page in						7 · · · · · · · · · · · · · · · · · · ·	71.61

-			1			PAGE 19	OF 24
CHEDULE C (FEC Form DANS	3)			Use separate schedu for each category of Detailed Summary Pa	the	FOR LINE NUMBER: (check only one)	X 13a 13b
AME OF COMMITTEE (In Full) Coolidge For Congress				Transa	action IE	0 : SC/10.4132	
LOAN SOURCE Full Name (Last,	First, Mic	ddle Initial) <b>PER</b>	SONAL FUN	IDS] Memo Item	Elect	tion: 2012	
Leslie Coolidge				-		Primary General	
Mailing Address 345 Old Sutton Road						Other (specify)	
City		State	ZIP Code	)			
Barrington Hills		IL	60010				
Original Amount of Loan		Cumulative Pa	ayment To D	ate Ba	lance O	utstanding at Close of	This Perio
439	.77			0.00		, 43	9.77
TERMS Date Incurred			Date Due	Interest Ra	ite	Secure	d:
<sup>M</sup> 10 <sup>M</sup> / <sup>D</sup> 19 <sup>D</sup> / <sup>Y</sup> Ž01Ž	Y	M M / D C	/ Y 12/	/31/12 <sup>×</sup> 0	).00	% (apr)	
List All Endorsers or Guarantors	(if any) t	o Loan Source					
1. Full Name (Last, First, Middle Ir	nitial)		1	Name of Employer			
Mailing Address			(	Occupation			
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7		
2. Full Name (Last, First, Middle In	itial)		1	Name of Employer			
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	,		
3. Full Name (Last, First, Middle In	itial)		1	Name of Employer			
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	,		
4. Full Name (Last, First, Middle In	itial)		1	Name of Employer			
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7		
UBTOTALS This Period This Page (c OTALS This Period (last page in this						, 43	9.77

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/10.4150
LOAN SOURCE Full Name (Last, First Leslie Coolidge Mailing Address	t, Middle Initial) <b>PERSONAL F</b>	CUNDSJ       Memo Item       Election: 2012         Primary       General         Other (specify) ▼
345 Old Sutton Road		
City Barrington Hills	State ZIP Co IL 60010	
Original Amount of Loan	Cumulative Payment To	D Date Balance Outstanding at Close of This Perio
12000.00		0.00 12000.00
TERMS Date Incurred		Interest Rate Secured:
List All Endorsers or Guarantors (if a		Nors of Employer
1. Full Name (Last, First, Middle Initia	)	Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
<b>CUBTOTALS</b> This Period This Page (option COTALS This Period (last page in this line		

CHEDULE C (FEC Form 3) OANS	)	Use separate schedule(s) for each category of the Detailed Summary Page
IAME OF COMMITTEE (In Full) Coolidge For Congress		Transaction ID : SC/10.4135
LOAN SOURCE Full Name (Last, Fir Leslie Coolidge	st, Middle Initial) <b>PERSONAL</b> .	FUNDS] Memo Item Election: 2012 Primary General
Mailing Address 345 Old Sutton Road		Other (specify)
City	State ZIP C	Code
Barrington Hills	IL 6001	0
Original Amount of Loan 32161.15	Cumulative Payment 1	To Date     Balance Outstanding at Close of This Perio       0.00     32161.19
TERMS Date Incurred		
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Initi		Name of Employer
1. Full Name (Last, First, Middle Initi	al)	
Mailing Address		Occupation
City S	tate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City S	tate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initia	ll)	Name of Employer
Mailing Address		Occupation
City S	tate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City S	tate ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (opt		
Carry outstanding balance only to LINE	3, Schedule D, for this line.	f no Schedule D, carry forward to appropriate line of Summary.

-			I			PAGE 22 OF 24
CHEDULE C (FEC Form DANS	n 3)			Use separate schedu for each category of Detailed Summary P	the	FOR LINE NUMBER: (check only one) X 13a 13b
AME OF COMMITTEE (In Full)				Transa	action I	ID : SC/10.4134
LOAN SOURCE Full Name (Last	, First, Mic	ddle Initial) <b>PERS</b>	ONAL FUN	DSJ Memo Item	Eleo	ction: 2012
Leslie Coolidge						Primary General
Mailing Address 345 Old Sutton Road						Other (specify)
City		State	ZIP Code	•		
Barrington Hills		IL	60010			
Original Amount of Loan		Cumulative Pay	ment To Da	ate Ba	alance (	Outstanding at Close of This Peric
600	00.00			0.00		5000.00
TERMS Date Incurred		Di	ate Due	Interest Ra	ate	Secured:
M 11 <sup>M</sup> / D 02 <sup>D</sup> / Y Ž012	Ý	M M / D D	′ <sup>×</sup> 12	31/12 <sup>×</sup>	0.00	% (apr)
List All Endorsers or Guarantors	s (if any) t	o Loan Source				
1. Full Name (Last, First, Middle	Initial)		١	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	· · · · · · · · ·
2. Full Name (Last, First, Middle I	Initial)		١	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	· · · · · · · · ·
3. Full Name (Last, First, Middle	Initial)		1	Name of Employer		
Mailing Address			(	Occupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7	· · · · · · · · ·
4. Full Name (Last, First, Middle I	Initial)		1	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	7	
UBTOTALS This Period This Page OTALS This Period (last page in th				·		6000.00

CHEDULE C (FEC DANS	Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Fi			Transaction ID : SC/10.4130
LOAN SOURCE Full Nar Leslie Coolidge	ne (Last, First, Mio	ddle Initial) <b>PERSONAL F</b>	Primary           X         General
Mailing Address 345 Old Sutton Road			Other (specify)
City		State ZIP Co	
Barrington Hills			
Original Amount of Loan	1780.84	Cumulative Payment To	Date     Balance Outstanding at Close of This Per       0.00     1780.84
TERMS Date Incur 11 <sup>M</sup> / D06 <sup>D</sup> /	<sup>Y</sup> 2012 <sup>Y</sup>		e Interest Rate Secured: 12/31/12 Y 0.00 % (apr) Yes Yes
List All Endorsers or Gu		to Loan Source	None of Employer
1. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
GUBTOTALS This Period Th			

			PAGE 24 OF 24
HEDULE C (FEC Form 3) ANS		Use separate schedul for each category of t Detailed Summary Pa	e(s) FOR LINE NUMBER: the (check only one) X 13a
ME OF COMMITTEE (In Full) oolidge For Congress		Transa	ction ID : SC/10.4164
LOAN SOURCE Full Name (Last, First	st, Middle Initial) <b>PERSONAL</b>	FUNDS] Memo Item	Election: 2012
Leslie Coolidge		-	Primary X General
Mailing Address 345 Old Sutton Road			Other (specify) ▼
City	State ZIP C	Code	
Barrington Hills	IL 60010	0	
Original Amount of Loan	Cumulative Payment 1	To Date Bal	ance Outstanding at Close of This Perio
30.00		0.00	30.00
TERMS Date Incurred	Date Du	e Interest Rat	e Secured:
M 12 <sup>M</sup> / D 01 <sup>D</sup> / Y 2012 <sup>Y</sup>	M M / D D / Y	<sup>Y</sup> 12/31/12 <sup>Y</sup> 0.	% (apr)
List All Endorsers or Guarantors (if	any) to Loan Source		
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	I)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
4. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 7 1
<b>UBTOTALS</b> This Period This Page (opt	ional)	· · · · · · · · · · · · · · · · · · ·	30.00