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Image# 13941827673

FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorize	d Committee	Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Dennis Anderson for	Congress			
ADDRESS (number and street)	P.O. Box 8587			
Check if different than previously reported. (ACC)	Gunree		IL 6003	1
2. FEC IDENTIFICATION	NUMBER ▼C	:ITY A	STATE A	ZIP CODE
C C00507459	3. IS REI	THIS X NEW PORT (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT ((a) Quarterly Reports: April 15 Quarterly Reports (Control of the Control of	y Report (Q1)	Day PRE -Election Report for the Primary (12P) Convention (12C)	: General (12G) Special (12S)	Runoff (12R)
X October 15 Quarterly		ction on	/ Y " Y " Y " Y	in the State of
January 31 Year-	End Report (YE) (c) 30-E	Day POST -Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Repo		ction on	/ Y " Y " Y " Y	in the State of
5. Covering Period	07 01 Y Y 2013		9 30 / Y	Y Y Y 2013
I certify that I have examined Type or Print Name of Treasu		of my knowledge and belief it is	true, correct and con	nplete.
	rett P. Smiley	[Electronically Filed]	Date 10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erro	oneous, or incomplete informat	ion may subject the person signir	ng this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

SUMMARY PAGE

2013

of Receipts and Disbursements

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2013

09

To:

30

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Report Covering the Period:

Dennis Anderson	for	Congress
-----------------	-----	----------

From:

COLUMN B COLUMN A Election Cycle-to-Date This Period Net Contributions (other than loans) **Total Contributions** (a) 710.00 38643.11 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 710.00 38643.11 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 171.63 95903.47 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 171.63 95903.47 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 658.90 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 59950.00 Schedule C and/or Schedule D).....

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 PAGE 3 / 19 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Dennis Anderson for Congress

01 2013 09 30 2013 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
11. C	ONTRIBUTIONS (other than loans) FROM:			
(a	n) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	550.00	14101.00	
	(ii) Unitemized(iii) TOTAL of contributions	160.00	15341.11	
	from individuals	710.00	29442.11	
(b	<u></u>	0.00	0.00	
(c	(such as PACs)	0.00	100.00	
(c	TOTAL CONTRIBUTIONS	0.00	9101.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	710.00	38643.11	
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00	
	OANS:			
(a	Made or Guaranteed by the Candidate	0.00	59700.00	
(b	·	0.00	0.00	
(c	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	59700.00	
	FFSETS TO OPERATING XPENDITURES			
(F	Refunds, Rebates, etc.)	0.00	0.00	
	THER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	710.00	98343.11	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	171.63	95903.47
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
	(b)	Political Party Committees	0.00	0.00
	(b)	Other Political Committees	0.00	0.00
		(such as PACs)	5.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТН	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	171.63	95903.47
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	120.53
24	TOT	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	710.00
25.	SUE	BTOTAL (add Line 23 and Line 24)		830.53
26.	тот	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	171.63
27.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	658.90

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

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

FOR LINE	NUMBER:	PAGE	5 C	F 19
(check onl	y one)			
X _{11a}	11b	11c	11d	
12	13a	13b	14	15

		Statements may not be sold or used by any pe a name and address of any political committee	
	NAME OF COMMITTEE (In Full) Dennis Anderson for Congress		
Α.	Full Name (Last, First, Middle Initial) Judith Gottlieb Mailing Address 2814 Regner Rd		Date of Receipt 09 04 2013
	City McHenry	State Zip Code IL 60051	Transaction ID : SA11AI.5272
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	300.00
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	
_	Full Name (Last, First, Middle Initial) Wayne Stone		Date of Receipt
B.	Mailing Address 26140 N Greenbriar Ct		09 13 2013
	City Lake Barrington	State Zip Code IL 60084	Transaction ID : SA11AI.5273
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer Retired	Occupation Retired	250.00
	Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date	
	Full Name (Last, First, Middle Initial)		Date of Receipt
C.	Mailing Address		M M / D D / Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	Name of Employer Occupation		
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
s	SUBTOTAL of Receipts This Page (optional)		550.00
1	OTAL This Period (last page this line number	only)	550.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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X	13a
	13b

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(check only one) Detailed Summary Page Transaction ID: SC/10.4113 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D16^D ^M 12^M 2011 12/31/2012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4275 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^M 03^M Ž012 12/31/2012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4338 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M Ž012 12/31/2012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4284 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 010 ^M 03^M Ž012 ^M09 0011 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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DANS		Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full)		Transaction	n ID : SC/10.4467
Dennis Anderson for Congre	SS		
LOAN SOURCE Full Name (Last, I Dennis Anderson	First, Middle Initial)		lection: 2012 Primary
Mailing Address P.O. Box 8587			✓ General Other (specify) ▼
City	State ZIP 0	Code	
Gurnee	IL 6003	1	
Original Amount of Loan	Cumulative Payment ⁻	To Date Balance	Outstanding at Close of This Period
2200	.00	0.00	2200.00
Date Incurred M05 ^M / D04 ^D / Y Ž01Ž	Date Du	Interest Rate O.00	Secured:
List All Endorsers or Guarantors (if any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	,
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (o	ptional)		2200.00
TOTALS This Period (last page in this	line only)		, , , , , ,
Carry outstanding balance only to LIN	IE 3. Schedule D. for this line.	If no Schedule D. carry forward	d to appropriate line of Summary.

Use separate schedule(s)

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DANS		Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full)		Transaction	n ID : SC/10.4634
Dennis Anderson for Congre	SS		
LOAN SOURCE Full Name (Last, F Dennis Anderson	irst, Middle Initial)		lection: 2012 Primary
Mailing Address P.O. Box 8587			✓ General Other (specify) ▼
City	State ZIP C	Code	
Gurnee	IL 6003	1	
Original Amount of Loan	Cumulative Payment T	To Date Balance	e Outstanding at Close of This Period
1000.	00	0.00	1000.00
Date Incurred MO6 ^M / DO2 ^D / Y ZO1Z	Date Due	e Interest Rate	Secured:
List All Endorsers or Guarantors (i	f any) to Loan Source		Yes No
1. Full Name (Last, First, Middle In		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , ,
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (or	otional)	>	1000.00
TOTALS This Period (last page in this	line only)		, , , , , , , , ,
Carry outstanding balance only to LIN	E 3. Schedule D. for this line. I	f no Schedule D. carry forward	d to appropriate line of Summary.

Use separate schedule(s)

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OANS		Detailed Summary Page	
AME OF COMMITTEE (In Full)		Transacti	on ID : SC/10.4636
Dennis Anderson for Congres	SS		
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)		Election: 2012
Dennis Anderson			Primary General
Mailing Address P.O. Box 8587			Other (specify)
City	State ZIP	² Code	
Gurnee	IL 600	031	
Original Amount of Loan	Cumulative Paymen	t To Date Baland	ce Outstanding at Close of This Period
400.0	00	0.00	400.00
TERMS Date Incurred	Date [Due Interest Rate	Secured:
M06 ^M / D16 ^D / Y 2012	Y M M / D D /	Y " Y " Y	% (apr) Yes No
List All Endorsers or Guarantors (in	any) to Loan Source		103 140
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	y y y
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
011	710.0	Amount Guaranteed	
City	State ZIP Code	Outstanding:	y
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	State ZIP Code	Outstanding:	, , , , , , , , ,
4. Full Name (Last, First, Middle Initial	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed	
0,		Outstanding:	y y w
SUBTOTALS This Period This Page (or	otional)	······································	400.00
TOTALS This Period (last page in this	ine only)		7
Carry outstanding balance only to LINI	E 3. Schedule D. for this line	e. If no Schedule D. carry forwa	ard to appropriate line of Summary

Use separate schedule(s) for each category of the

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4637 NAME OF COMMITTEE (In Full) **Dennis Anderson for Congress** LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M06^M Ž012 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 400.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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DANS		Detailed Summary Page	
AME OF COMMITTEE (In Full)		Transacti	on ID : SC/10.4638
Dennis Anderson for Congre	SS		
LOAN SOURCE Full Name (Last, I Dennis Anderson	First, Middle Initial)		Election: 2012 Primary
Mailing Address P.O. Box 8587			☐ Other (specify) ▼
City	State ZIP	Code	
Gurnee	IL 600	031	
Original Amount of Loan	Cumulative Paymen	t To Date Baland	ce Outstanding at Close of This Period
4000	.00	0.00	4000.00
Date Incurred M 06 / D 19 / Y 2012	Date I	Due Interest Rate	Secured:
List All Endorsers or Guarantors (if any) to Loan Source		Yes No
Full Name (Last, First, Middle Ir	**	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y x
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
SUBTOTALS This Period This Page (o	ptional)	······	4000.00
TOTALS This Period (last page in this	line only)		7 7 7
Carry outstanding balance only to LIN	E 3. Schedule D. for this line	. If no Schedule D. carry forwa	ard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5053 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 20 ^M 07^M Ž012 0.00 Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5052 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 07^M Ž012 0.00 Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.5050 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3500.00 0.00 3500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M08^M Ž012 0.00 Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 3500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.5142 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson ★ General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2700.00 0.00 2700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 10^M Ž012 0.00 Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2700.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.5265 NAME OF COMMITTEE (In Full) Dennis Anderson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dennis Anderson General Mailing Address Other (specify) \blacktriangledown P.O. Box 8587 City State ZIP Code IL 60031 Gurnee Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01^M ^D29^D 2013 0.00 Ňoně % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) 59950.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.