PAGE 1 / 24

FFC I	EPORT OF I	SEMENTS	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
	;			
L				
ADDRESS (number and street)	345 Old Sutton Road			
Check if different than previously	Barrington		I IL 6001	0 1 1 1 1
reported. (ACC)		Y▲		
2. FEC IDENTIFICATION NU		. –		
C C00505610	3. IS TH REPO	~	AMENDED (A)	STATE ▼ DISTRICT
 4. TYPE OF REPORT (Choose (a) Quarterly Reports: April 15 Quarterly R July 15 Quarterly R October 15 Quarter January 31 Year-End Termination Report 	(b) 12-Da leport (Q1) ly Report (Q2) d Report (YE) (c) 30-Da	ay PRE -Election Report for the Primary (12P) Convention (12C) ion on / P P y POST -Election Report for the General (30G) ion on / P P	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period	M / D D / Y Y Y Y 2019	Y through C		Y Y Y 2019
I certify that I have examined the Type or Print Name of Treasurer	is Report and to the best of Coolidge, Leslie, , ,	f my knowledge and belief it is	s true, correct and corr	pplete.
Cool Signature of Treasurer	idge, Leslie, , ,	[Electronically Filed]	Date M M /	^D D / Y Y Y Y 15 / 2019
NOTE: Submission of false, errone	ous, or incomplete information	n may subject the person signir	ng this Report to the per	nalties of 52 U.S.C. §30109.
Office Use Only				EC FORM 3 Revised 05/2016)

Ima	ige#⊿	201904159146329706		
		FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 24
		or Type Committee Name lidge For Congress		
R	eport	Covering the Period: From:	M / D D / Y Y Y Y 01 / 2019 To:	M 03 / D D / Y Y Y Y 31 / 2019
			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 TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule 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

_	_		
I		TAILED SUMMARY PAGE of Receipts	
14	FEC Form 3 (Revised 05/2016)		PAGE 3 / 24
	Vrite or Type Committee Name		
_	Coolidge For Congress		
R	Report Covering the Period: From:	/ D D / Y Y Y Y 01 2019 To:	M M / D D / Y Y Y Y 03 31 2019
	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	9.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(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		
	AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
		0.00	0.00
	(b) All Other Loans (c) TOTAL LOANS	, , , , , , , , , , , , , , , , , , , ,	7 7 7
	(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	7 7 7 7	7 7 7
	11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	15.41

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# 201904159146329708

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	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	-	0.00

age# 201004100140020100							
SCHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page				
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 Perio			
13540.04	9	7	1500.00	12040.04			
TERMS Date Incurred	Γ	Date Due	Interest Rate (If none, enter				
M10M / D18D / Y Ž01Ť Y	M M / D D	[/] ^Y 12	/31/12 [¥] 0.1				
List All Endorsers or Guarantors (if any) t	o Loan Source		Name of Employer				
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Dutstanding:	g			
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			

age# 201004100140020110							
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page				
ME OF COMMITTEE (In Full) coolidge For Congress			Transac	tion ID : SC/10.4138			
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		× Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Peric			
100.00	3		0.00	100.00			
TERMS Date Incurred	Ľ	Date Due	Interest Rate (If none, enter				
M11M / D08D / Y Ž01Ť Y	M M / D D	/ ¥ 12	31/12 ^Y 0.0				
List All Endorsers or Guarantors (if any) t	to Loan Source						
1. Full Name (Last, First, Middle Initial)		ſ	Name of Employer				
Mailing Address			Decupation				
City State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 1 y 1 1 x 1			
2. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
City State	ZIP Code		Amount Guaranteed Dutstanding:	g 1 1 g 1 1 a 1			
3. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Dccupation				
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y 1 1 y 1 1 x 1			
4. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y 1 1 y 1 1 x 1			
UBTOTALS This Period This Page (optional).				7 7 7 100.00			

					PAGE 7 OF 24		
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full coolidge For Congress	,			Transad	ction ID : SC/10.4137		
LOAN SOURCE Full Name Coolidge, Leslie, , ,	e (Last, First, Mid	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	Y Personal Funds of the Candidat		
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric		
	500.00			0.00	500.00		
TERMS Date Incurred M12 ^M / P15 ^D / Y	d Ž01ť ^v	M M / D D	Date Due	Interest Rate (If none, enter)/31/12 Y 0.	.00		
List All Endorsers or Guar	rantors (if any) to	o Loan Source					
1. Full Name (Last, First, N	Viddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
2. Full Name (Last, First, M	liddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
3. Full Name (Last, First, M	liddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
4. Full Name (Last, First, M	liddle Initial)	-		Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
UBTOTALS This Period This)			500.00		

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

J				r					
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page					
ME OF COMMITTEE (In F oolidge For Congre	,			Transa	action ID : SC/10.4142				
LOAN SOURCE Full Na Coolidge, Leslie, ,	•	ddle Initial)		Memo Iter	× Primary				
Mailing Address 345 Old Sutton Road					General Other (specify) ▼				
City Barrington Hills		State	ZIP Code 60010	e	Personal Funds of the Candidate				
Original Amount of Loar		Cumulative P	avment To D	Date Ba	lance Outstanding at Close of This Perio				
	5154.15		,	0.00	5154.15				
TERMS Date Incu	rred		Date Due	Interest Ra (If none, ent					
^M 01 ^M / ^D 02 ^D /	ΥŽ01ŽΥ	M M / D	D / Y 12						
List All Endorsers or G		o Loan Source		Name of Employer					
1. Full Name (Last, First	t, 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					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:	9				
3. Full Name (Last, First,	Middle Initial)			Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y y y y				
4. Full Name (Last, First,	Middle Initial)			Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	y				
UBTOTALS This Period Th					5154.15				

J									
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page					
ME OF COMMITTEE (In oolidge For Congre	•			Transa	action ID : SC/10.4141				
LOAN SOURCE Full Na Coolidge, Leslie, ,	•	ddle Initial)		Memo Iten	× Primary				
Mailing Address 345 Old Sutton Road					General Other (specify) ▼				
City Barrington Hills		State IL	ZIP Code 60010	9	Personal Funds of the Candidate				
Original Amount of Loa	n	Cumulative P	ayment To D	Date Ba	lance Outstanding at Close of This Peric				
	11000.00			0.00	11000.00				
TERMS Date Incu	urred		Date Due	Interest Ra (If none, ente					
^M 02 ^M / ^D 23 ^D /	^ү Ž01Ž ^ү	M M / D	D / Y 12		0.00				
List All Endorsers or G		o Loan Source		Name of Employer					
1. Full Name (Last, Firs	st, 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:	y				
3. Full Name (Last, First	, Middle Initial)			Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	y				
4. Full Name (Last, First	, Middle Initial)			Name of Employer					
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	y				
JBTOTALS This Period T					7 7 7				

lage# 2010041001400201	17			Г	PAGE 10 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 Cong	,			Transad	ction ID : SC/10.4140	
LOAN SOURCE Full 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 Cod 60010	e	Personal Funds of the Candidate	
Original Amount of Lo	ban	Cumulative Pa	yment To E	Date Bala	ance Outstanding at Close of This Perio	
,	15000.00	7		0.00	15000.00	
TERMS Date In	ocurred	[Date Due	Interest Rate (If none, enter		
^M 02 ^M / ^D 26 ^D	⁷ Ž01Ž ^Y	M M / D D	0 / Y 12	ž/31/12 ^v	.00 Yes X No	
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
SUBTOTALS This Period	/				15000.00	
Carry outstanding balance	ce only to LINE 3, Sch	nedule D, for thi	s line. If n	o Schedule D, carry forv	ward to appropriate line of Summary.	

lage# 20100410014002011	•				DA 05 44 05 04
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a
AME OF COMMITTEE (In Coolidge For Congi	,			Transac	ction ID : SC/10.4143
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	9	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	C	Date Due	Interest Rate (If none, enter	
M03 ^M / D07 ^D /	^ү Ž01Ž ^ү	M M / D D	/ Y 12	ý31/12 ^v 0.	00 % (apr) Yes X No
List All Endorsers or (Guarantors (if any) t	o Loan Source			
1. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, Firs	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
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, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1
SUBTOTALS This Period				L	15900.95
Carry outstanding balanc	e only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forv	vard to appropriate line of Summary.

					PAGE 12 OF 24	
CHEDULE C (FE OANS	EC Form 3)			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:	
IAME OF COMMITTEE (II Coolidge For Cong	,			Transac	tion ID : SC/10.4146	
LOAN SOURCE Full	Name (Last, First, Mic	ddle Initial)		Memo Item	Election: 2012	
Coolidge, Leslie,	. , ,				Primary General	
Mailing Address 345 Old Sutton Road					Other (specify) v	
City		State	ZIP Code	9		
Barrington Hills		IL	60010		Personal Funds of the Candidate	
Original Amount of Lo	ban	Cumulative Pag	yment To D	Date Bala	nce Outstanding at Close of This Period	
	653.85			0.00	653.85	
TERMS Date In	ncurred	C	Date Due	Interest Rate (If none, enter		
^M 03 ^M / ^D 07 ^D	/ ¥ Ž012 ¥	M M / D D	/ Y 12	ý31/12 [×] 0.		
List All Endorsers or	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
	1			Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
3. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
SUBTOTALS This Period	/				653.85 7 7	
Carry outstanding balance	ce only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summa	

CHEDULE C (FEC Form 3	3)				PAGE 13 OF 24
OANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a	
AME OF COMMITTEE (In Full) Coolidge For Congress				Transac	tion ID : SC/10.4144
LOAN SOURCE Full Name (Last, F Coolidge, Leslie, , ,	irst, Mide	dle 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 Loan 6000.0	00	Cumulative Pay	/ment To E	Date Bala	nce Outstanding at Close of This Peric 6000.00
TERMS Date Incurred M03 ^M / D09 ^D / Y Ž01Ž	Y	D 1 M / D D	Pate Due	Interest Rate (If none, enter)/31/12 Y 0.0	
List All Endorsers or Guarantors (i 1. Full Name (Last, First, Middle Ini	• ·	Loan Source		Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed	y y
2. Full Name (Last, First, Middle Init	ial)			Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed Outstanding:	<u>y</u> <u>y</u> <u>x</u> .
3. Full Name (Last, First, Middle Init	ial)			Name of Employer	
Mailing Address			Ļ	Occupation Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y
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
CUBTOTALS This Period This Page (op COTALS This Period (last page in this					6000.00
OTALS This Period (last page in this Carry outstanding balance only to LIN					vard to appro

CHEDULE C (FEC Form 3) DANS				Use separate schedul for each category of t Detailed Summary Pag	the (check only one) × 13a	
ME OF COMMITTEE (In Fu oolidge For Congres	,			Transad	ction ID : SC/10.4145	
LOAN SOURCE Full Nam Coolidge, Leslie, , ,	ne (Last, First, Mid	dle Initial)		🗌 Memo Item	Election: 2012 X Primary General	
Mailing Address 345 Old Sutton Road					Other (specify)	
City Barrington Hills		State	ZIP Code 60010	9	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio	
<u> </u>	18861.70	<u> </u>	,	0.00	18861.70	
TERMS Date Incurre	ed	C	ate Due	Interest Rate (If none, ente		
M03 ^M / D13 ^D / Y	Ž01Ž ^v	/ M / D D	/ Y 12	/31/12 ^v	.00 % (apr) Yes X No	
List All Endorsers or Gua	arantors (if any) to	Loan Source				
1. Full Name (Last, First,	Middle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, M	Middle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, N	Middle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, N	Middle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
JBTOTALS This Period This	s Page (optional)			······ •	18861.70	

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) X 13a
AME OF COMMITTEE (In Full) Coolidge For Congress			Transac	ction ID : SC/10.4147
LOAN SOURCE Full Name (Last, First, Mic Coolidge, Leslie, , ,	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	•	X Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Period
2661.28			0.00	2661.28
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter	
M03 ^M / D20 ^D / Y Ž01Ž Y	M M / D D		/31/12 ^Y 0.	00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer	
Mailing Address			Decupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y y x
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Dccupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y y y y
3. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(Dccupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address		(Dccupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	9 1 9 1 1 1
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line only Carry outstanding balance only to LINE 3. Sch	/)		······	2661.28

age# 201004100140020120			1		
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4148
LOAN SOURCE Full Name (L Coolidge, Leslie, , ,	ast, First, Mio	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		Personal Funds of the Candidat
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio
	1000.00			0.00	1000.00
TERMS Date Incurred		[Date Due	Interest Rate (If none, enter	
M04M / D03D / Y Ž(01Ž ^Y	M M / D D	y 12	31/12 ^Y	w (apr) Yes ₩ N
List All Endorsers or Guarant		o Loan Source			
1. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address			(Dccupation	
City	State ZIP Code		(Amount Guaranteed Dutstanding:	y
2. Full Name (Last, First, Midd	le Initial)		1	Name of Employer	
Mailing Address			(Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Last, First, Midd	le Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	· · · · · · · · · ·
4. Full Name (Last, First, Midd	le Initial)		1	Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
UBTOTALS This Period This Pa OTALS This Period (last page in					, 1000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

•					
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	JMBER:		
ME OF COMMITTEE (In Full) Coolidge For Congress		Transaction ID : SC/10.4149			
LOAN SOURCE Full Name (Last, First, M Coolidge, Leslie, , ,	iddle Initial)	Memo Item Election: 2012 Primary General			
Mailing Address 345 Old Sutton Road		Other (specify)	×		
City Barrington Hills	State	IP Code 60010	ds of the Candidate		
Original Amount of Loan	Cumulative Pay	ent To Date Balance Outstanding at	Close of This Perio		
1652.64	,	0.00	1652.64		
TERMS Date Incurred	D	e Due Interest Rate (If none, enter 0)	Secured:		
M04 ^M / D26 ^D / Y Ž01Ž Y	M M / D D	[/] ^Y 12 ^y 31/12 ^Y 0.00 % (apr)	Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source	Name of Employer			
1. Full Name (Last, First, Middle Initial)					
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:			
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line on		3 7	1652.64		

age# 201004100140020122					
CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one)
ME OF COMMITTEE (In Full) coolidge For Congress				Transa	ction ID : SC/10.4136
LOAN SOURCE Full Name (L Coolidge, Leslie, , ,	ast, First, Mio	ddle Initial)		Memo Item	Primary
Mailing Address 345 Old Sutton Road					Cher (specify) ▼
City Barrington Hills		State	ZIP Code 60010	•	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	lyment To D	ate Bal	ance Outstanding at Close of This Perio
	71.61	9		0.00	71.61
TERMS Date Incurred		[Date Due	Interest Rat (If none, ente	er O)
M 10 ^M / D 01 ^D / Y Ži	01Ž Y	M M / D D	⁴ 12	/31/12 [×] C	0.00 % (apr) Yes ✗ №
List All Endorsers or Guarant	ors (if any) t	o Loan Source			
1. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code		(Amount Guaranteed Dutstanding:	y y
2. Full Name (Last, First, Midd	le Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Midd	le Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y
4. Full Name (Last, First, Midd	le Initial)		1	Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	g 1 1 g 1 1 a 1
UBTOTALS This Period This Pa OTALS This Period (last page in					, 71.61

-			BLOE 10 OF 01		
HEDULE C (FEC Form 3) ANS		Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In Full) oolidge For Congress		Transa	action ID : SC/10.4132		
LOAN SOURCE Full Name (Last, First, M Coolidge, Leslie, , ,	iddle Initial)	Memo Item	Election: 2012 Primary General		
Mailing Address 345 Old Sutton Road			Other (specify)		
City Barrington Hills	State	ZIP Code 60010	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ment To Date Ba	I lance Outstanding at Close of This Perio		
439.77		0.00	439.77		
TERMS Date Incurred	[ate Due Interest Rat (If none, enter			
M10 ^M / D19 ^D / Y Ž01Ž Y	M M / D D	/ ¥ 12/31/12 ¥	0.00 % (apr) Yes 🗴 No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	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	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:	g		
JBTOTALS This Period This Page (optional)			439.77		

lage# 20100410014002012	-				
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 Congr	,			Transac	ction ID : SC/10.4150
LOAN SOURCE Full N Coolidge, Leslie,	•	Idle 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 Loa	an	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
	12000.00		7	0.00	12000.00
TERMS Date Inc	curred	Γ	Date Due	Interest Rate (If none, enter	
M10 ^M / D19 ^D /	YŽ01Ž Y	M M / D D	/ ^Y 12	ý31/12 [×] 0.	00 % (apr) Yes 🗶 No
List All Endorsers or C	Guarantors (if any) t	o Loan Source			
1. Full Name (Last, Fir	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
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, Firs	t, 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
SUBTOTALS This Period ⁻					12000.00
Carry outstanding balance	e only to LINE 3, Sch	edule D, for thi	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summar

	PAGE 21 OF 24
Use separate schedule(s) for each category of the Detailed Summary Page	
Transa	action ID : SC/10.4135
Memo Item	Election: 2012 Primary General
	Other (specify)
	Personal Funds of the Candidate
Bal	lance Outstanding at Close of This Perio
0.00	32161.19
Interest Rat (If none, ente	
C	0.00 % (apr) Yes 🗴 No
Name of Employer	
ion	
Amount Guaranteed Outstanding:	
f Employer	
ion	
Amount Guaranteed Outstanding:	
f Employer	
ion	
eed ding:	y y
f Employer	
ion	
eed ding:	y 1 y 1 x 1
	32161.19
•	lule D, carry for

age# 201004100140020120					
HEDULE C (FEC For ANS	m 3)			Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a
ME OF COMMITTEE (In Full) oolidge For Congress				Transad	ction ID : SC/10.4134
LOAN SOURCE Full Name (La Coolidge, Leslie, , ,	ist, First, Mio	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	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric
6	000.00			0.00	6000.00
TERMS Date Incurred		C	Date Due	Interest Rat (If none, ente	
M11M / D02D / Y Ž0	1Ž Y	M M / D D	/ ^Y 12	ý31/12 [×] 0	.00 % (apr) Yes 🗴 No
List All Endorsers or Guarante	ors (if any) t	o Loan Source			
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:	
3. Full Name (Last, First, Middle	e 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:	y y
UBTOTALS This Period This Pag					6000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

		PAGE 23 OF 24
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
ME OF COMMITTEE (In Full) coolidge For Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, Mi Coolidge, Leslie, , ,	ddle Initial)	Memo Item Election: 2012 Primary
Mailing Address 345 Old Sutton Road		General
City Barrington Hills	State	ZIP Code 60010
Original Amount of Loan	Cumulative Pa	nent To Date Balance Outstanding at Close of This Perio
1780.84	9	0.00 1780.84
TERMS Date Incurred	C	te Due Interest Rate Secured: (If none, enter 0)
M11M / D06D / Y Ž01Ž Y	M M / D D	/ Y 12/31/12 Y 0.00 % (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:
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line on		

lage# 20100+1001+0020120					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	9	Personal Funds of the Candidate	
Original Amount of Loan Cumulative Payment To			yment To D	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 ^M / D01 ^D /	^ү Ž01Ž ^ү	M M / D D	/ Y 12	ў́31/12 [×] 0.	00 % (apr) Yes X No	
List All Endorsers or G	Guarantors (if any) to	b Loan Source				
1. Full Name (Last, Fire	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:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 8 1	
SUBTOTALS This Period T					30.00 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.	