

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

David Hale for Congress

ADDRESS (number and street)

P.O. Box 6004

Check if different than previously reported. (ACC)

Rockford

IL

61125

2. FEC IDENTIFICATION NUMBER ▼

C C00553826

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IL

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David Jerry Hale Jr.

Signature of Treasurer David Jerry Hale Jr.

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

David Hale for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="4692.76"/>	<input type="text" value="135.00"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="4692.76"/>	<input type="text" value="135.00"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="1149.61"/>	<input type="text" value="731.85"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="1149.61"/>	<input type="text" value="731.85"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="3543.15"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

David Hale for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2578.40	100.00
(ii) Unitemized.....	2114.36	35.00
(iii) TOTAL of contributions from individuals ▶	4692.76	135.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4692.76	135.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4692.76	135.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1149.61	731.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1149.61	731.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4692.76
25. SUBTOTAL (add Line 23 and Line 24).....	4692.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1149.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3543.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
David Hale for Congress

A. Full Name (Last, First, Middle Initial)
Tony Corso

Mailing Address 1657 Candlewick Dr SW

City State Zip Code
Poplar Grove IL 61065

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

Name of Employer Occupation
Midwest Stone Source Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2013

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Ronald Cutburth

Mailing Address 210 Sunnyside Rd

City State Zip Code
Greenville TN 37743

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

Name of Employer Occupation
Unknown Unknown

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2013

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
300.00

Donation

C. Full Name (Last, First, Middle Initial)
Ronald Cutburth

Mailing Address 210 Sunnyside Rd

City State Zip Code
Greenville TN 37743

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

Name of Employer Occupation
Unknown Unknown

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2013

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
100.00

Donation

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
David Hale for Congress

Full Name (Last, First, Middle Initial) A. David Jerry Hale Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2013	
Mailing Address 412 Washington St		Transaction ID : SA11AI.4246	
City Rockford	State IL	Zip Code 61104	Amount of Each Receipt this Period _____ 153.15 In-kind - Tshirts
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Allscripts	Occupation Solutions Analyst		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 292.51		

Full Name (Last, First, Middle Initial) B. David Jerry Hale Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2013	
Mailing Address 412 Washington St		Transaction ID : SA11AI.4262	
City Rockford	State IL	Zip Code 61104	Amount of Each Receipt this Period _____ 5.74 In-kind - Printing
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Allscripts	Occupation Solutions Analyst		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 298.25		

Full Name (Last, First, Middle Initial) C. David Jerry Hale Jr.		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2013	
Mailing Address 412 Washington St		Transaction ID : SA11AI.4247	
City Rockford	State IL	Zip Code 61104	Amount of Each Receipt this Period _____ 20.95 In-kind - Printing
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Allscripts	Occupation Solutions Analyst		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 319.20		

SUBTOTAL of Receipts This Page (optional).....	_____ 179.84
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
David Hale for Congress

A. Full Name (Last, First, Middle Initial)
David Jerry Hale Jr.

Mailing Address 412 Washington St

City Rockford State IL Zip Code 61104

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

Name of Employer Allscripts Occupation Solutions Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **352.76**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2013

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period
33.56

In-kind - Printing

B. Full Name (Last, First, Middle Initial)
David Jerry Hale Jr.

Mailing Address 412 Washington St

City Rockford State IL Zip Code 61104

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

Name of Employer Allscripts Occupation Solutions Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **417.76**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period
65.00

In-kind - Business Cards

C. Full Name (Last, First, Middle Initial)
Robert Harner

Mailing Address 3271 Mornlake Dr

City Rockford State IL Zip Code 61114

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

Name of Employer Unknown Occupation Unknown

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2013

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
500.00

Donation

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

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

598.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
David Hale for Congress

A. Full Name (Last, First, Middle Initial)
Sherry Hellmuth

Mailing Address 8450 Country Lane

City State Zip Code
Dekalb IL 60115

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

Name of Employer Occupation
Retired Retiree

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 17 / 2013

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
500.00

Donation

B. Full Name (Last, First, Middle Initial)
Kristine Lamendola

Mailing Address 5776 Vesper Dr

City State Zip Code
South Beloit IL 61080

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

Name of Employer Occupation
Rockford Health System Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 09 / 2013

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period
250.00

Donation

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

Mailing Address 109 Spring Court

City State Zip Code
Sheldon IL 60966

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

Name of Employer Occupation
Self Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2013

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
250.00

Donation

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
David Hale for Congress

A. Full Name (Last, First, Middle Initial)
William McCarthy

Mailing Address 109 Spring Court

City Sheldon State IL Zip Code 60966

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

Name of Employer Self Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2013

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
 50.00

Donation

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

Mailing Address 109 Spring Court

City Sheldon State IL Zip Code 60966

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

Name of Employer Self Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.4214

Amount of Each Receipt this Period
 100.00

Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

150.00

2578.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
David Hale for Congress

A. Full Name (Last, First, Middle Initial)
David Jerry Hale Jr.

Mailing Address 412 Washington St

City State Zip Code
Rockford IL 61104

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

Name of Employer Occupation
Allscripts Solutions Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
517.76

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		24		2013

Transaction ID : SA11D.4272

Amount of Each Receipt this Period
100.00

In-kind - Hotel room

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4272

Used hotel points to stay in this room. Fair Market Value \$100.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
David Hale for Congress

Full Name (Last, First, Middle Initial) A. A'Deas Printing		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 719 S. St. Francis		Amount of Each Disbursement this Period 368.95 Transaction ID : SB17.4234
City Wichita	State KS	
Zip Code 67211	Purpose of Disbursement Printing	Category/ Type 004
Candidate Name David Hale for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 16	

Full Name (Last, First, Middle Initial) B. David Jerry Hale Jr.		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2013
Mailing Address 412 Washington St		Amount of Each Disbursement this Period 153.15 Transaction ID : SB17.4251
City Rockford	State IL	
Zip Code 61104	Purpose of Disbursement In-kind - Tshirts	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 16	

Full Name (Last, First, Middle Initial) c. David Jerry Hale Jr.		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 412 Washington St		Amount of Each Disbursement this Period 5.74 Transaction ID : SB17.4263
City Rockford	State IL	
Zip Code 61104	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 16	

SUBTOTAL of Disbursements This Page (optional).....	527.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 14			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
David Hale for Congress

Full Name (Last, First, Middle Initial) A. David Jerry Hale Jr.			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013	
Mailing Address 412 Washington St			Amount of Each Disbursement this Period 20.95	
City Rockford	State IL	Zip Code 61104	Transaction ID : SB17.4250	
Purpose of Disbursement In-kind - Printing		Category/ Type		
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: IL	District: 16			

Full Name (Last, First, Middle Initial) B. David Jerry Hale Jr.			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013	
Mailing Address 412 Washington St			Amount of Each Disbursement this Period 33.56	
City Rockford	State IL	Zip Code 61104	Transaction ID : SB17.4258	
Purpose of Disbursement In-kind - Printing		Category/ Type		
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: IL	District: 16			

Full Name (Last, First, Middle Initial) c. David Jerry Hale Jr.			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013	
Mailing Address 412 Washington St			Amount of Each Disbursement this Period 65.00	
City Rockford	State IL	Zip Code 61104	Transaction ID : SB17.4249	
Purpose of Disbursement In-kind - Business Cards		Category/ Type		
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: IL	District: 16			

SUBTOTAL of Disbursements This Page (optional).....	119.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
David Hale for Congress

Full Name (Last, First, Middle Initial) A. David Jerry Hale Jr.		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013
Mailing Address 412 Washington St		Amount of Each Disbursement this Period 100.00
City Rockford	State IL	
Zip Code 61104	Purpose of Disbursement In-kind - Hotel room	Transaction ID : SB17.4273
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: IL District: 16		

Full Name (Last, First, Middle Initial) B. Transxt		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 190 Monroe Ave		Amount of Each Disbursement this Period 362.90
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Payment for Donation Mainteneace	Transaction ID : SB17.4219
Candidate Name David Hale for Congress	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 16		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	362.90
TOTAL This Period (last page this line number only).....	1010.25