

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Rohl for Congress

ADDRESS (number and street)

3735 E. 1453rd Rd.

Check if different than previously reported. (ACC)

Ottawa

IL

61350

2. FEC IDENTIFICATION NUMBER ▼

C C00521500

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on 11 / 06 / 2012 in the State of IL

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2012

through

10 / 17 / 2012

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

Type or Print Name of Treasurer Tom Ganiere

Signature of Treasurer Tom Ganiere

[Electronically Filed]

Date

10 / 25 / 2012

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

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Rohl for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6061.48	34520.37
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6061.48	34520.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	28701.91	45943.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28701.91	45943.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-11422.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Rohl for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2277.00	15534.70
(ii) Unitemized.....	3784.48	17535.67
(iii) TOTAL of contributions from individuals ▶	6061.48	33070.37
(b) Political Party Committees.....	0.00	1450.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6061.48	34520.37
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	6061.48	34520.37

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28701.91	45943.00
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	28701.91	45943.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11217.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6061.48
25. SUBTOTAL (add Line 23 and Line 24).....	17279.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28701.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-11422.63

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

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

FOR LINE NUMBER: PAGE 5 OF 12  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

Mailing Address 114 Countryside Ave.

City Ottawa State IL Zip Code 61350

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

Name of Employer Ottawa Township High School Occupation Administration staff

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : SA11AI.4973**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2876 Cole Ln.

City New Lenox State IL Zip Code 60451

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

Name of Employer Not employed Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : SA11AI.5088**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO Box 1395

City LaSalle State IL Zip Code 61301

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4964**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

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

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

Mailing Address 303 Birchwood Ln.

City State Zip Code  
Dekalb IL 60115

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

Name of Employer Occupation  
Dekalb School District 428 Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**628.35**

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

**Transaction ID : SA11AI.5034**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 107 Mattek Ave.

City State Zip Code  
Dekalb IL 60115

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**280.00**

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

**Transaction ID : SA11AI.5054**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 541 Cloverlane Dr.

City State Zip Code  
Sycamore IL 60178

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

Name of Employer Occupation  
Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**900.00**

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

**Transaction ID : SA11AI.5095**

Amount of Each Receipt this Period  
**500.00**

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

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

**650.00**

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

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

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

Mailing Address 541 Cloverlane Dr.

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.5047**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 119 Windsor Dr.

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
924.35

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

**Transaction ID : SA11AI.5111**

Amount of Each Receipt this Period  
200.00

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

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

Mailing Address 119 Windsor Dr.

City Dekalb	State IL	Zip Code 60115
----------------	-------------	-------------------

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1124.35

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2012

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
200.00

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

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

500.00

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

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

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 352.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

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

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

Mailing Address 214 McKinley #9

City Imperial State TX Zip Code 79743

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

Name of Employer None Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

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

**Transaction ID : SA11AI.5142**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 136 Ilehamwood Dr.

City Dekalb State IL Zip Code 60115

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

Name of Employer Retired Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

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

**Transaction ID : SA11AI.5026**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

125.00

2277.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 12			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2012
Mailing Address 14 Arrow St. Ste. 11		Amount of Each Disbursement this Period 24059.00
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement	<b>Transaction ID : SB17.5148</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24562.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 12			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rich Gallati</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address <b>2397 Alpha Court W.</b>		Amount of Each Disbursement this Period <b>300.00</b>
City <b>Dekalb</b> State <b>IL</b> Zip Code <b>60115</b>	Purpose of Disbursement phone bank operations	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : SB17.5175</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Moore</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2012</b>
Mailing Address <b>119 Windsor Dr.</b>		Amount of Each Disbursement this Period <b>200.00</b>
City <b>Dekalb</b> State <b>IL</b> Zip Code <b>60115</b>	Purpose of Disbursement In-kind - refreshments for fund raiser 10/11/12 dekalb	
Candidate Name	Category/Type	<b>Transaction ID : SB17.5120</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address <b>PO Box 4521</b>		Amount of Each Disbursement this Period <b>1912.17</b>
City <b>Carol Stream</b> State <b>IL</b> Zip Code <b>60197</b>	Purpose of Disbursement palm cards - Hotcards.com	
Candidate Name	Category/Type <b>006</b>	<b>Transaction ID : SB17.5170</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2412.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**Rohl for Congress**

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1544.07
<b>TOTAL</b> This Period (last page this line number only).....	28518.81