10/20/2020 20 : 13

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48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FUL RODNEY FOR		S				\neg		
ADDRESS (number and street)	PO BOX 344							
CITY STATE TAYLORVILLE IL				ZIP CODE 62568-0344		\dashv		
2. NAME OF CANDIDATE DAVIS, RODNEY, L, ,			3. OFFICE	3. OFFICE SOUGHT (State and District) House IL 13			4. FEC IDENTIFICATION NUMBER C00521948	
			House					
5. ISTHIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	YES, IT AI	MENDS THE	NOTICE FILED ON	/	/	
A. FULL NAME SCHNUCK, TODD, , ,				Name of Employer SCHNUCK MARKETS			Amount	
MAILING ADDRESS 9752 LITZSINGER ROAD			Transactio	Transaction ID : 64F7EB1AEB1FA47E			1000.00	
CITY	STATE	ZIP CODE	Occupation		I / LDIALDII /			
SAINT LOUIS	MO	63124 105						
SAINT LOUIS MO 63124-1058 B. FULL NAME INTRATER, ANDREW, , ,			Name of Er	Name of Employer INFORMATION REQUESTED			Amount	
MAILING ADDRESS	,,,						1000.00	
151 EAST 58TH STREET			Toompootis	ID - CO	40ED 400 40D	10/18/2020		
CITY	STATE	ZIP CODE	Occupation		4CFBA8CA6B	<u> </u>		
NEW YORK	NY	10022 126		INFORMATION REQUESTED				
C. FULL NAME	INI	10022-128	-		QUEUTED	Date (month,	Amount	
PURCELL, PHILIF	> , , ,			Name of Employer CONTINENTAL INVESTORS		day, year)	Amount	
MAILING ADDRESS	• • •					10/19/2020	2800.00	
6300 SAGEWOOD DR			Transaction	Transaction ID: 61F97A2F5FF364AE5				
CITY	STATE	ZIP CODE	Occupation	1				
PARK CITY	UT	84098-750	2 EXECUT	EXECUTIVE				
D. FULL NAME			Name of Er			Date (month,	Amount	
MCGRAW, MICHAEL, R, ,				MCDONALD'S				
MAILING ADDRESS 5305 SUMTER LANE				-			1000.00	
3303 SOWITER LAINE			Transaction	on ID : 64	D963E9D595E4	4B8[
CITY	STATE	ZIP CODE	Occupation	1				
SPRINGFIELD	IL	62711-74	OWNER	OWNER				
E. FULL NAME NEAL, JEFFREY, , ,			Name of Er RETIRED	Name of Employer RETIRED			Amount	
MAILING ADDRESS 1099 PELHAM RD						10/19/2020	2800.00	
1099 PELHAM KD			Transaction	Transaction ID : 6505D846895144FB8		FB8		
CITY	STATE	ZIP CODE	Occupation	Occupation				
WINNETKA	IL	60093-201	5 RETIRED)				
SIGNATURE (optional) DATWYLER, THOMAS, , ,	1	'	[Electronica	lly Filed]	DATE 10/20/2020	Federal E 999 E Street, N	information contact: Election Commission W, Washington, DC 20463 4-9530, Local 202-694-1100	



Any information copied from reports and statements filed under the Federal Election Campaign Act 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.



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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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1. NAME OF COMMITTEE IN FULL RODNEY FOR CONGRESS					
ADDRESS (number and street) PO BOX 344					
CITY, STATE, and ZIP CODE					
TAYLORVILLE		IL 62568-0344	continuatio	n page	
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	N NUMBER	
DAVIS, RODNEY, L, ,		House IL 13	C00521948		
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NE	W FILING	YES, IT AMENDS THE NOTICE FILED ON	//	<i></i>	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount	
LANDAHL, SUSAN, , ,		EXELON GENERATION	day, year)		
24545 S MOORMAN AVE			10/19/2020	1000.00	
		Transaction ID: 64ECFA6DEE2544D4	1B0E		
		Occupation	1		
CHANNAHON	IL 60410-9793	EXECUTIVE			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount	
INTERNATIONAL UNION OF PAINTERS AND AL			day, year)		
(IUPAT) POLITICAL ACTION TOGETHER POLITI	CAL COMM		10/19/2020	2500.00	
7234 PARKWAY DRIVE					
		Transaction ID: 64F57F718D2CE4370	9C9		
HANOVER	MD 21076-1307	Occupation			
O FULL NAME MANURIO ADDDDGGG AND ZID GODE		N. CF. I	Data (manth	Amazunt	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	/ IN EEDEDAL	Name of Employer	Date (month, day, year)	Amount	
AMERICAN WATER WORKS COMPANY PAC AKA AMERICAN WATER FEDERA					
1025 LAUREL OAK RD			10/19/2020	1000.00	
1023 EAGREE OAR RD		Transaction ID + 6DB9C2 A520B4040A	DOE2		
		Transaction ID: 6DB8C3A539B4049A Occupation	Data		
VOORHEES	NJ 08043-3506	Cocapation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount	
ERIE INSURANCE PAC			day, year)		
EITIE II VOOTO II VOE 1 710			10/19/2020	1000.00	
PO BOX 1699			10/10/2020	1000.00	
		Transaction ID: 6C9CB9DC7BD1B47	5DA3F		
		Occupation			
ERIE	PA 16530-1000				
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount	
LEHIGH HANSON INC POLITICAL ACTI	ON		day, year)		
COMMITTEE			10/19/2020	2500.00	
300 E JOHN CARPENTER FWY					
		Transaction ID : 602142C77659B4D0CB01			
IRVING	TX 75062-2727	Occupation			
	.,				



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1. NAME OF COMMITTEE IN FULL RODNEY FOR CONG	RESS			
ADDRESS (number and street) PO BO			-	
CITY, STATE, and ZIP CODE			_	
TAYLORVILLE		IL 62568-0344	continuatio	n page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	
DAVIS, RODNEY, L, ,		House IL 13	C00521948	THO III DE IT
5. ISTHIS AN AMENDMENT? X NO,	THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	//	/
A. FULL NAME, MAILING ADDRESS AND ZIP O	CODE	Name of Employer	Date (month,	Amount
BUILDING AND RESTORING THE AMERICAN DREAM FUND (BRAD PAC)			day, year) 10/19/2020	1000.00
PO BOX 30844			10/19/2020	1000.00
		Transaction ID: 6F6D52FC1423F407	'481E	
CHEVY CHASE	MD 20825	Occupation		
B. FULL NAME. MAILING ADDRESS AND ZIP O		Name of Employer	Date (month,	Amount
,		Name of Employer	day, year)	Amount
VICTORY AND FREED	OW PAC		10/19/2020	2000.00
1666 K ST NW			10/19/2020	2000.00
SUITE 500		Transaction ID: 6A0EC7344D83845F	F9B7	
WASHINGTON	DC 20006	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP C	CODE	Name of Employer	Date (month,	Amount
EUREKA PAC			day, year)	
PO BOX 30844			10/19/2020	1000.00
PO BOX 30644		Transaction ID - 6025250562424422	2040	
		Transaction ID: 692535CF631314233	3010	
BETHESDA	MD 20824-0844			
D. FULL NAME, MAILING ADDRESS AND ZIP O	CODE	Name of Employer	Date (month,	Amount
POINT ACTION PAC			day, year)	
DO DOV 100001			10/19/2020	2800.00
PO BOX 420304		Transaction ID: 6F0105E2E4BAD48	109F2	
		Occupation	7	
ATLANTA	GA 30342-0304			
E. FULL NAME, MAILING ADDRESS AND ZIP C	ODE	Name of Employer	Date (month, day, year)	Amount
			,,,,,,,	
		Occupation		