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Image# 15950599802

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	
2. FEC IDENTIFICATION	NUMBER ▼C	ITY A	STATE A	ZIP CODE
C C00507459	3. IS <sup>-</sup> REF	THIS NEW (N) OR	× AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Co. (a) Quarterly Reports:  April 15 Quarterly	/ Report (Q1)	Primary (12P)  Convention (12C)	General (12G) Special (12S)	Runoff (12R)
X October 15 Quar		etion 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		ection on	/ Y " Y " Y " Y	in the State of
5. Covering Period	07 01 / Y Y Y 1		9 30 / Y	Y Y Y 2014
I certify that I have examined  Type or Print Name of Treasu	·	of my knowledge and belief it is	true, correct and con	nplete.
	usan Glad-Anderson	[Electronically Filed]	Date 02	05 / Y Y Y Y Y Y Y Y Y 2015
NOTE: Submission of false, erro	oneous, or incomplete informat	ion may subject the person signir	ng this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

### **Dennis Anderson for Congress**

07 09 30 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 14261.00 40490.70 (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) 14261.00 40490.70 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 15551.02 40795.41 (from Line 17) ..... (b) Total Offsets to Operating 0.00 74.48 Expenditures (from Line 14)..... (c) Net Operating Expenditures 15551.02 40720.93 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 959.41 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 / 38 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

## **Dennis Anderson for Congress**

01 2014 09 30 2014 Report Covering the Period: From: To:

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
1. CONTRIBUTIONS (other than loans)	FROM:			
<ul><li>(a) Individuals/Persons Other Than Political Committees</li><li>(i) Itemized (use Schedule A)</li></ul>	5200.00	23340.00		
(ii) Uniternized	6561.00	13150.70		
(iii) TOTAL of contributions from individuals	11761.00	36490.70		
(b) Political Party Committees		0.00		
(c) Other Political Committees (such as PACs)	2500.00	4000.00		
(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00		
(other than loans) (add Lines 11(a)(iii), (b), (c), and	(d)) 14261.00	40490.70		
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3. LOANS:				
(a) Made or Guaranteed by the Candidate		250.00		
(b) All Other Loans	0.00	0.00		
(c) TOTAL LOANS (add Lines 13(a) and (b))		250.00		
4. OFFSETS TO OPERATING EXPENDITURES				
(Refunds, Rebates, etc.)	0.00	74.48		
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	14261.00	40815.18		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 38

	II. DISBUR	SEMENTS -	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXF	PENDITURES	15551.02	40795.41
18.	TRANSFERS TO AUTHORIZED CO	OTHER DMMITTEES	1500.00	1500.00
19.	LOAN REPAYME	NTS:		
	` '	ade or Guaranteed lidate	0.00	0.00
	(b) Of All Other	Loans	0.00	0.00
	` '	N REPAYMENTS 9(a) and (b))	0.00	0.00
20.	REFUNDS OF C	ONTRIBUTIONS TO:		
	` '	Persons Other al Committees	0.00	0.00
		ī	0.00	0.00
		ty Committees	0.00	0.00
	(such as PA	Cs)	0.00	0.00
	` '	TRIBUTION REFUNDS 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBUR	SEMENTS	0.00	0.00
22.	TOTAL DISBURS (add Lines 17, 18	SEMENTS  3, 19(c), 20(d), and 21)	17051.02	42295.41
		III. CASH SUM	MARY	
23.	CASH ON HAND	) at beginning of reporti	NG PERIOD	3749.43
:4	TOTAL RECEIPTS	S THIS PERIOD (from Line 16,	page 3)	14261.00
5.	SUBTOTAL (add	Line 23 and Line 24)		18010.43
6.	TOTAL DISBURS	SEMENTS THIS PERIOD (from I	Line 22)	17051.02
	CASH ON HAND	) AT CLOSE OF REPORTING F		959.41

FOR LINE NUMBER: **PAGE** 5 OF Use separate schedule(s) (check only one) 11a 11b 11d 11c

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for each category of the ITEMIZED RECEIPTS Detailed Summary Page 12 13a 13b 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Colette Ansley-Treonis Date of Receipt Mailing Address 6N634 Sycamore Ave 29 2014 City State Zip Code Transaction ID: SA11AI.5775 Ш 60174 St. Charles FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) James Burke Date of Receipt Mailing Address 113 Pitz Ln 19 2014 City State Zip Code Transaction ID: SA11AI.5665 Batavia IL 60510 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 30.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary Meneral Control 210.00 Other (specify) Full Name (Last, First, Middle Initial) James Burke Date of Receipt Mailing Address 113 Pitz Ln 2014 13 City State Zip Code Transaction ID: SA11AI.5745 IL Batavia 60510 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 30.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date X General Primary Other (specify) 240.00 560.00 SUBTOTAL of Receipts This Page (optional)..... 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:					PAGE	6	OF	38
(chec	ck only	or	ne)					
×	11a		11b		11c	11	d	
	12		13a		13b	14		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.

υı	for commercial purposes, other than using the	name and address of any political committee	to solicit contributions from such confiffiltee.
$\rangle$	NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress		
۱.	Full Name (Last, First, Middle Initial)  Martha Hanna  Mailing Address 213 Evergreen Dr  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Batavia  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: 2014  Primary General Other (specify)	Occupation Retired Election Cycle-to-Date	Amount of Each Receipt this Period  35.00
3.	Full Name (Last, First, Middle Initial)  Martha Hanna  Mailing Address 213 Evergreen Dr  City Batavia  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: 2014  Primary General Other (specify)	State Zip Code IL 60510  C  Occupation Retired Election Cycle-to-Date	Date of Receipt  M M M / D D / 2014  Transaction ID : SA11Al.5620  Amount of Each Receipt this Period  35.00
<b>)</b> .	Full Name (Last, First, Middle Initial)  Nancy Hardy  Mailing Address 12721 Golf View Drive  City Huntley  FEC ID number of contributing federal political committee.  Name of Employer  None  Receipt For: 2014  Primary General Other (specify)	State Zip Code IL 60142  C  Occupation Retired Teacher  Election Cycle-to-Date	Date of Receipt  08
	UBTOTAL of Receipts This Page (optional)		170.00
T	OTAL This Period (last page this line number o	inly)	

FOR LINE NUMBER: **PAGE** 7 OF 38 (check only one) 11a 11b 11c Detailed Summary Page 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Nancy Hardy Date of Receipt Mailing Address 12721 Golf View Drive 2014 13 City State Zip Code Transaction ID: SA11AI.5741 IL 60142 Huntley FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 60.00 Name of Employer Occupation None Retired Teacher Receipt For: 2014 Election Cycle-to-Date Primary X General 505.00 Other (specify) Full Name (Last, First, Middle Initial) Mary Johnson Date of Receipt Mailing Address 8610 S Hill Rd 14 2014 City State Zip Code Transaction ID: SA11AI.5579 Marengo IL 60152 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired N/A Receipt For: 2014 Election Cycle-to-Date M General Primary 600.00 Other (specify) Full Name (Last, First, Middle Initial) Mary Johnson Date of Receipt Mailing Address 8610 S Hill Rd 2014 07 City State Zip Code Transaction ID: SA11AI.5635 IL Marengo 60152 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 60.00 Name of Employer Occupation N/A Retired Receipt For: 2014 Election Cycle-to-Date X General Primary 660.00 Other (specify) 620.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) 11a 11b 11c 12

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for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Arlene Kelly Date of Receipt Mailing Address 920 Adams Ave. 80 2014 25 City State Zip Code Transaction ID: SA11AI.5671 IL 60084 Wauconda FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation None Not Employed Receipt For: 2014 Election Cycle-to-Date Primary X General 260.00 Other (specify) Full Name (Last, First, Middle Initial) Arlene Kelly Date of Receipt Mailing Address 920 Adams Ave. 25 2014 Citv State Zip Code Transaction ID: SA11AI.5672 Wauconda IL 60084 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation None Not Employed Receipt For: 2014 Election Cycle-to-Date M General Primary 460.00 Other (specify) Full Name (Last, First, Middle Initial) **Becky Kent Medins** Date of Receipt Mailing Address 1544 Bull Valley Dr 2014 07 City State Zip Code Transaction ID: SA11AI.5624 IL Woodstock 60098 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date X General Primary 300.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER:					PAGE	:	9_	OF	38
(che	ck only	or	ne)						
X	11a		11b		11c		11	d	_
	12		13a		13b		14	ļ	15

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) John Knepper Date of Receipt Mailing Address 358 Chauncey St 80 2014 29 City State Zip Code Transaction ID: SA11AI.5715 IL 60178 Sycamore FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation N/A Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **Turner Law Offices** Date of Receipt Mailing Address 107 W Exchange St 29 2014 City State Zip Code Transaction ID: SA11AI.5713 Sycamore IL 60178 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date M General Primary 300.00 Other (specify) Full Name (Last, First, Middle Initial) Louis Pierce Date of Receipt Mailing Address 2333 Danbury Ct 2014 26 City State Zip Code Transaction ID: SA11AI.5603 IL Geneva 60134 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Retired Receipt For: 2014 Election Cycle-to-Date X General Primary 245.00 Other (specify)

FOR LINE NUMBER: **PAGE** 10 OF 38 Use separate schedule(s) (check only one) 11a 11b 11d 11c 12 13a 13b

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Louis Pierce Date of Receipt Mailing Address 2333 Danbury Ct 2014 19 City State Zip Code Transaction ID: SA11AI.5758 Ш 60134 Geneva FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 50.00 Name of Employer Occupation Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 295.00 Other (specify) Full Name (Last, First, Middle Initial) Stephen Platt Date of Receipt Mailing Address 784 Flint Tr 14 2014 Citv State Zip Code Transaction ID: SA11AI.5578 Crystal Lake IL 60012 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary Meneral Control 400.00 Other (specify) Full Name (Last, First, Middle Initial) Jacqueline Schmack Date of Receipt Mailing Address 594 W. State St 2014 29 City State Zip Code Transaction ID: SA11AI.5712 IL Sycamore 60178 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Richard A. Schmack Attorney Receipt For: 2014 Election Cycle-to-Date X General Primary 400.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: (check only one) 11a 11b

**PAGE** 11 OF 38 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11d 11c Detailed Summary Page 12 13a 13b 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Wayne Stone Date of Receipt Mailing Address 26140 N Greenbriar Ct 80 2014 19 City State Zip Code Transaction ID: SA11AI.5649 IL 60084 Lake Barrington FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) Joseph Stupec Date of Receipt Mailing Address 2536 W. Tracy Lane 26 2014 City State Zip Code Transaction ID: SA11AI.5602 Aurora IL 60506 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired N/A Receipt For: 2014 Election Cycle-to-Date M General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) Joseph Stupec Date of Receipt Mailing Address 2536 W. Tracy Lane 2014 07 City State Zip Code Transaction ID: SA11AI.5634 IL Aurora 60506 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation N/A Retired Receipt For: 2014 Election Cycle-to-Date X General Primary 350.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 12 OF 38 Use separate schedule(s) (check only one) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Joseph Stupec Date of Receipt Mailing Address 2536 W. Tracy Lane 2014 29 City State Zip Code Transaction ID: SA11AI.5770 IL 60506 Aurora FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 100.00 Name of Employer Occupation N/A Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 450.00 Other (specify) Full Name (Last, First, Middle Initial) Martha Swanson Date of Receipt Mailing Address 5615 Ridgeway Road 14 2014 City State Zip Code Transaction ID: SA11AI.5576 Ringwood IL 60072 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Retired N/A Receipt For: 2014 Election Cycle-to-Date M General Primary 450.00 Other (specify) Full Name (Last, First, Middle Initial) Martha Swanson Date of Receipt Mailing Address 5615 Ridgeway Road 2014 09 City State Zip Code Transaction ID: SA11AI.5733 IL Ringwood 60072 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation N/A Retired Receipt For: 2014 Election Cycle-to-Date X General Primary 550.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one)  $|X|_{11a}$ 11b 11c

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for each category of the ITEMIZED RECEIPTS 11d Detailed Summary Page 12 13a 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Janet Wildman Date of Receipt Mailing Address 5N380 Ronsu Ln 80 2014 07 City State Zip Code Transaction ID: SA11AI.5632 IL 60175 St. Charles FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... 5200.00 TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	F	OR	LINE I	VU	MBER:		PAGE	14	OF		38
Use separate schedule(s)		(check only one)									
for each category of the			11a		11b	X	11c	11	ld		
Detailed Summary Page			12		13a		13b	14	1		15
not be sold or used by any p				•			soliciting			utio	ns

		Detailed Summa	ry rage		12	13a	.    1	3b	14	15
Any information copied from such Reports and Sor for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress										
Full Name (Last, First, Middle Initial) INTERNATIONAL BROTHERHOOD OF ELECTRIC	AL WORKER	S POLITICAL ACTION	COMMITTEE	Τ.	D. I	Deservice				
Mailing Address 900 SEVENTH ST, NW					Date of M M M M M M M M M M M M M M M M M M	Receip	19		014	Y
City WASHINGTON	State DC	Zip Code 20001		Tra		on ID :	SA11C.			_
FEC ID number of contributing federal political committee.	C co	0027342		_	Amount	of Eac	h Recei	pt this	Period	_
Name of Employer	Occupation	1						7	2500.0	00
Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date	2500.00							
Full Name (Last, First, Middle Initial)				1	Date of	Receip	t			
Mailing Address					M M		D /	Y	Y	Y
City	State	Zip Code					_			
FEC ID number of contributing federal political committee.	С			- /   	Amount	of Eac	h Recei	pt this	Period	_
Name of Employer	Occupation	1						-		
Receipt For: Primary General Other (specify)		ycle-to-Date								
Full Name (Last, First, Middle Initial)				<u> </u>	Date of	Receip	t			
Mailing Address					M M		D /	Y	Y	Y
City	State	Zip Code					_	_		
FEC ID number of contributing federal political committee.	С			-   ,	Amount	of Eac	h Recei	pt this	Period	
Name of Employer	Occupation	٦				-		-		
Receipt For: Primary General Other (specify)	Election C	ycle-to-Date								
SUBTOTAL of Receipts This Page (optional)									2500.0	00
TOTAL This Period (last page this line number of						,			2500.0	00

	lage# 13330333010				
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	nedule(s) (a of the	FOR LINE NUMBER: PAGE 15 OF 38 check only one)    X   17
	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Dennis Anderson for Congress				erson for the purpose of soliciting contributions
<u>/</u>	Full Name (Last, First, Middle Initial) Act Blue				Date of Disbursement
٦.	Mailing Address 14 Arrow St, Suite 11				07 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Cambridge Purpose of Disbursement	State MA	Zip Code 02138		Amount of Each Disbursement this Period
	Credit Card Processing Fee  Candidate Name			Category/	Transaction ID : SB17.5843
	Office Sought: House Disbution Senate President	Primary Other (s	X General	Туре	_
3.	State: District:  Full Name (Last, First, Middle Initial)  Act Blue  Mailing Address 14 Arrow St, Suite 11				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Cambridge Purpose of Disbursement Credit Card Processing Fee	State MA	Zip Code 02138		Amount of Each Disbursement this Period 1.19
	Candidate Name			Category/ Type	Transaction ID : SB17.5842
	Office Sought: House Disbuter Senate President State: District:	ursement For Primary Other (s	X General		
Э.	Full Name (Last, First, Middle Initial)  Act Blue				Date of Disbursement
	Mailing Address 14 Arrow St, Suite 11  City S	State Zi	p Code		07 13 2014
			2138		Amount of Each Disbursement this Period  3.57
	Candidate Name			Category/ Type	Transaction ID : SB17.5831
	Office Sought: House Disbuter Senate President State: District:	Primary Other (s	X General		

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

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

ago rooocooo			
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sched	dule(s) (c	OR LINE NUMBER: PAGE 16 OF 38  theck only one)  X 17 18 19a 19b
	Detailed Summary	Page	20a 20b 20c 21
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a			
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress			
Full Name (Last, First, Middle Initial)  A. Act Blue			Date of Disbursement
Mailing Address 14 Arrow St, Suite 11			07 19 2014
City State Cambridge MA	Zip Code 02138		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fee			1.19 Transaction ID : SB17.5830
Candidate Name		Category/ Type	
	For: 2014 nary		
State: District:			
Full Name (Last, First, Middle Initial)  Act Blue  Mailing Address 14 Arrow St, Suite 11			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Cambridge MA	Zip Code 02138		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fee			0.40 Transaction ID : SB17.5832
Candidate Name		Category/ Type	
	nary General er (specify)		
Full Name (Last, First, Middle Initial)			
c. Act Blue			Date of Disbursement
Mailing Address 14 Arrow St, Suite 11			07
City State	Zip Code		Amount of Each Disbursement this Period
Cambridge MA Purpose of Disbursement	02138		17.60
Credit Card Processing Fee			Transaction ID : SB17.5833
Candidate Name		Category/ Type	-
	For: 2014 nary		
State: District:			

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

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

## S

	-					
		(FEC Form SBURSEMENT	-	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 17 OF 38 (check only one)    X   17
						person for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMM Dennis And	IITTEE (In Full) erson for Cong	ress			
	Full Name (Last,	First, Middle Initial)				
A.	Act Blue	·				Date of Disbursement
	Mailing Address	14 Arrow St, Suite 11				08 03 2014
	City Cambridge		State MA	Zip Code 02138		Amount of Each Disbursement this Period
	Purpose of Disbu Credit Card Proc					2.97 Transaction ID : SB17.5834
	Candidate Name				Category/ Type	Transaction ID: 3617.3634
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General	71	
	State:	District:				
В.	Act Blue	First, Middle Initial)  14 Arrow St, Suite 11				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Cambridge		MA	02138		Amount of Each bisbursoment this renou
	Purpose of Disbu Credit Card Proc	rsement essing Fee				53.53 Transaction ID : SB17.5835
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General		
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C.	Act Blue	First, Middle Initial)				Date of Disbursement
	Mailing Address	14 Arrow St, Suite 11				08 / D D / Y Y Y Y Y Y 17 17 17 17 17 17 17 17 17 17 17 17 17
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	Cambridge Purpose of Disbu Credit Card Proc	rsement essing Fee	MA 0	2138		22.32
	Candidate Name	<b>J</b>			Category/ Type	Transaction ID : SB17.5836
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General		
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress				
Α.	Full Name (Last, First, Middle Initial) Act Blue			Date of Disbursement	
	Mailing Address 14 Arrow St, Suite 11	08 24 2014			
	City State Cambridge MA	Zip Code 02138		Amount of Each Disbursement this Period	
	Purpose of Disbursement Credit Card Processing Fee		7.91 Transaction ID : SB17.5837		
	Candidate Name		Category/ Type		
	Office Sought:  House Senate President  Disbursement Formary Other (				
	State: District: Full Name (Last, First, Middle Initial)				
3.	Act Blue			Date of Disbursement	
	Mailing Address 14 Arrow St, Suite 11			08 31 7 2014	
	City State Cambridge MA	Zip Code 02138		Amount of Each Disbursement this Period	
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	Candidate Name		Category/ Type		
	State: District: Full Name (Last, First, Middle Initial)				
C.	Act Blue	Date of Disbursement			
	Mailing Address 14 Arrow St, Suite 11	09			
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Cambridge Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought:

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	Full Name (Last, I Act Blue	First, Middle Initial)				Date	e of Disk	ourseme	ent		
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	Mailing Address	14 Arrow St, Suite 11					9	21	Ľ	2014	
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	Office Sought:	House Senate	Disbursement For Primary	-	71						
		President	Other (s	specify)							
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C.	Full Name (Last, I Breaker Pre	First, Middle Initial)				Date	e of Disk	ourseme	ent		
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	ny information copied from such Reports and Stateme r for commercial purposes, other than using the name			
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۹.	Full Name (Last, First, Middle Initial) North Shore Printers			Date of Disbursement
	Mailing Address 535 South Sheridan Road			07 18 2014
	City Sta Waukegan IL	te Zip Code 60085		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing (Field)  Candidate Name		Category/	416.25 Transaction ID : SB17.5787
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3.	North Shore Printers  Mailing Address 535 South Sheridan Road			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta Waukegan IL	•		Amount of Each Disbursement this Period
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		nt For: 2014 imary		
Э.	Full Name (Last, First, Middle Initial)  Jim Rauh  Mailing Address 201 S. West St			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Crown Point IN	Zip Code 46307		Amount of Each Disbursement this Period
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	Candidate Name		Category/ Type	Transaction ID : SB17.5780
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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)  Dennis Anderson for Congress  Full Name (Last, First, Middle Initial)  A. Jirn Rauh  Mailing Address 201 S. West St  City State Zip Code Crown Pont In 46307  Purpose of Disbursement Persident Senate President In House Senate President In 46307  Full Name (Last, First, Middle Initial)  B. Jim Rauh  Mailing Address 201 S. West St  City State Zip Code Crown Point In 46307  Furnose of Disbursement President In 46307  Furnose of Disbursement President In 46307  Furnose of Disbursement President In 1800.00  Transaction ID : SB17.5814  Date of Disbursement In 1800.00  Transaction ID : SB17.5814  Date of Disbursement In 1800.00  Transaction ID : SB17.5815  Transaction ID : SB17.5815  Date of Disbursement In 1800.00  Transaction ID : SB17.5815  Transaction ID : SB17.5815				Detailed Summar	y Page	
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Crown Point IN 46307  Purpose of Disbursement Payroll  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  Primary Capecify)  House Senate Primary Capecify		Mailing Address 201 S. Wes	st St			
Crown Point IN 46307  Purpose of Disbursement Payroll  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  Crown Point IN 46307  Transaction ID: SB17.5815  Transaction ID: SB17.5815		City		ip Code		Amount of Each Disbursement this Period
Payroll  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  Payroll  Category/ Type  Transaction ID : SB17.5815			IN 4	16307		- 1000 00
Office Sought:    House						1800.00
Office Sought:    House						Transaction ID : SB17.5815
Senate Primary General  Other (specify)		Office Sought: House	se Disbursement For	r: 2014	1,700	-
State: District:			dent Other (s	specify)		
	_	State: District:				

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

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 22 OF 38 (check only one)    X   17
					person for the purpose of soliciting contributions are to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress				
Α.	Full Name (Last, First, Middle Initial)  Jim Rauh				Date of Disbursement
	Mailing Address 201 S. West St				09 12 2014
	City Crown Point	State IN	Zip Code 46307		Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll				407.94 Transaction ID : SB17.5820
	Candidate Name  Office Sought: House Disb	ursement For	·· 2014	Category/ Type	
	Senate President	Primary Other (s	X General		
	State: District:   Full Name (Last, First, Middle Initial)				
В.	Jim Rauh  Mailing Address 201 S. West St				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Crown Point	State IN	Zip Code 46307		Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll				1800.00 Transaction ID : SB17.5828
	Candidate Name			Category/ Type	Transaction in . 3517.3025
	Senate President	ursement For Primary Other (s	X General		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Stars and Stripes				Date of Disbursement
	Mailing Address 7560 W 100th P				07 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Bridgeview		p Code 60455		Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies  Candidate Name	305.20 Transaction ID : SB17.5789			
	Senate President	ursement For Primary Other (s	X General		
_	State: District:				
					0540.44

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

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

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

**PAGE** 23 38 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) **Dennis Anderson for Congress** Full Name (Last, First, Middle Initial) Date of Disbursement A. Stars and Stripes 2014 Mailing Address 7560 W 100th P 08 28 City State Zip Code Amount of Each Disbursement this Period IL Bridgeview 60455 Purpose of Disbursement 406.57 Office Supplies Transaction ID: SB17.5805 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary ✓ General Other (specify) President District: Full Name (Last, First, Middle Initial) Stars and Stripes Date of Disbursement Mailing Address 7560 W 100th P 09 19 2014 City State Zip Code Amount of Each Disbursement this Period IL 60455 Bridgeview 2071.00 Purpose of Disbursement Printing Transaction ID: SB17.5808 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 X General Senate Primary Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 2477.57 SUBTOTAL of Disbursements This Page (optional)..... 14369.89

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

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 OF 38 (check only one)  17   X   18   19a   19b   20a   20b   20c   21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)  Dennis Anderson for Congress	,	
Full Name (Last, First, Middle Initial)  A. DEMOCRATIC PARTY OF ILLINOIS		Date of Disbursement
Mailing Address P.O. BOX 518		09 19 2014
City State SPRINGFIELD IL	Zip Code 62705	Amount of Each Disbursement this Period
Purpose of Disbursement Vote Builder  Candidate Name		1500.00 Transaction ID : SB18.5825
Office Sought: House Disbursement F	Category Type or: 2014	
Senate Primar	ry X General (specify)	
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category Type	y/
State: District: Full Name (Last, First, Middle Initial)		
D.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		
	Category Type	y/ 
Office Sought: House Disbursement F Senate Primar		

Other (specify)

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

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State:

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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: <sup>D</sup>16<sup>D</sup> <sup>M</sup> 12<sup>M</sup> 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

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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: <sup>D</sup> 15 <sup>M</sup> 03<sup>M</sup> 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: <sup>M</sup> 03<sup>M</sup> 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.

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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 <sup>M</sup> 03<sup>M</sup> Ž012 <sup>M</sup>09 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.

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AME OF COMMITTEE (In Full)			Transa	ction	ID : SC/10.4467			
Dennis Anderson for Co	ongress							
LOAN SOURCE Full Name	(Last, First, Middle	e Initial)		Ele	ection: 2012			
Dennis Anderson					Primary			
Mailing Address P.O. Box 8587					General Other (specify) ▼			
City	St	ate ZIP Cod	de	_				
Gurnee		IL 60031						
Original Amount of Loan	(	Cumulative Payment To	Date Bal	ance	Outstanding at Clos	e of Th	is P	eriod
	2200.00	2 9	0.00		7 7	2200.	.00	
TERMS  Date Incurred		Date Due	Interest Ra	te	S	ecured:		
M 05 M / D 04 D / Y	Ž01Ž Y	M / D D / Y	Y Y Y 0.0	0	% (apr)	Yes	X	No
List All Endorsers or Guara		oan Source						
1. Full Name (Last, First, Mi	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	-			_	
City	State	ZIP Code	Guaranteed Outstanding:	7	7		J	
2. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount Guaranteed	-			<del>-</del>	
City	State	ZIP Code	Outstanding:	7	-		_	
3. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	-			7	
City	State	ZIP Code	Guaranteed Outstanding:	7	9	-	4	
4. Full Name (Last, First, Mic	ddle Initial)		Name of Employer					
Mailing Address			Occupation					
			Amount	_			7	
City	State	ZIP Code	Guaranteed Outstanding:	7	9		_	
SUBTOTALS This Period This P	Page (optional)		·····	_	7	2200.	.00	
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(check only one) Detailed Summary Page Transaction ID: SC/10.4634 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 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 02 <sup>M</sup>06<sup>M</sup> 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)..... 1000.00 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.

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**LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4636 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: <sup>M</sup>06<sup>M</sup> <sup>D</sup>16 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.

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(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: <sup>D</sup> 18<sup>D</sup> <sup>M</sup>06<sup>M</sup> 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4638 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 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup>06<sup>M</sup> <sup>D</sup>19<sup>D</sup> 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 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)..... 4000.00 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.

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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 <sup>M</sup> 07<sup>M</sup> 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.

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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: <sup>D</sup>25 <sup>M</sup> 07<sup>M</sup> 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.

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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: <sup>D</sup>31 <sup>M</sup>08<sup>M</sup> 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 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.

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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 <sup>M</sup> 10<sup>M</sup> 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.

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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: <sup>M</sup> 01<sup>M</sup> <sup>D</sup>29<sup>D</sup> 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.