

# 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

Nancy Rotering for Congress, Inc.

ADDRESS (number and street) ▼

PO Box 18

Check if different than previously reported. (ACC)

Highland Park

IL

60035

2. **FEC IDENTIFICATION NUMBER** ▼

C C00574434

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

10

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Michael Kreloff

Signature of Treasurer Michael Kreloff

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Nancy Rotering for Congress, Inc.**

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))....	165157.44	924870.61
(b) Total Contribution Refunds (from Line 20(d)) .....	750.00	750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	164407.44	924120.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	121767.55	332732.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	4.00	103.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	121763.55	332629.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	936131.42	
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).....	345000.00	

**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

Nancy Rotering for Congress, Inc.

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).....	140777.97	824592.92
(ii) Unitemized.....	23450.00	95137.52
(iii) TOTAL of contributions from individuals ▶	164227.97	919730.44
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3100.00
(d) The Candidate.....	929.47	2040.17
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	165157.44	924870.61
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	100000.00	345000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	345000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	4.00	103.00
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)..... ▶	265161.44	1269973.61

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	121767.55	332732.19
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 .....	750.00	750.00
(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)).....	750.00	750.00
21. OTHER DISBURSEMENTS .....	50.00	360.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	122567.55	333842.19

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	793537.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	265161.44
25. SUBTOTAL (add Line 23 and Line 24).....	1058698.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	122567.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	936131.42

**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 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 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.

NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Abrams**

Mailing Address 423 Ashland Pl

City Highland Park State IL Zip Code 60035-5025

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGDFAZ8**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Matthew Arbit**

Mailing Address 2028 Saint Johns Ave

City Highland Park State IL Zip Code 60035-2417

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

Name of Employer Sears Logistics Services Occupation Supply Chain Support

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2015

**Transaction ID : VPF8SG3ZQ64**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 776 Whiteoaks Ln

City Highland Park State IL Zip Code 60035-3656

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

Name of Employer Self-Employed Occupation Art Tour Leader and Educator

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCB251**

Amount of Each Receipt this Period  
**25.00**

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

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

**325.00**

**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 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Janice Aronoff**

Mailing Address 1635 Eastwood Ave

City Highland Park State IL Zip Code 60035-2109

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

Name of Employer Added Incentives Occupation Book Keeper

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 28 / 2015**

**Transaction ID : VPF8SG7RM27**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Janice Aronoff**

Mailing Address 1635 Eastwood Ave

City Highland Park State IL Zip Code 60035-2109

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

Name of Employer Added Incentives Occupation Book Keeper

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2015**

**Transaction ID : VPF8SGCBPN0**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1029 Old Green Bay Rd

City Winnetka State IL Zip Code 60093-1571

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

Name of Employer Added Incentives Occupation Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2015**

**Transaction ID : VPF8SGEYBM4**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1100.00**

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

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

FOR LINE NUMBER: PAGE 7 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Grant A Bagan**

Mailing Address 1068 Saxony Dr

City Highland Park State IL Zip Code 60035-4049

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

Name of Employer Pont Partners, LLC Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG2JVB7**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Elise Barack**

Mailing Address 1379 Sheridan Rd

City Highland Park State IL Zip Code 60035-3406

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : VPF8SG6G0W6**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 1379 Sheridan Rd

City Highland Park State IL Zip Code 60035-3406

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGAZGM5**

Amount of Each Receipt this Period  
**25.00**

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

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

**250.00**

**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 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Barnett**

Mailing Address 775 Bluff St

City State Zip Code  
Glencoe IL 60022-1504

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : VPF8SG887P6**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Anne Flanigan Bassi**

Mailing Address 3325 Summit Ave

City State Zip Code  
Highland Park IL 60035-1109

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

Name of Employer Occupation  
Moraine Township Supervisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGDFAT8**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 425 Davis St  
Unit 1124

City State Zip Code  
Evanston IL 60201-4757

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

Name of Employer Occupation  
Benton Foundation Trustee

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : VPF8SG711M9**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00



**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 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Chuck Bergen**

Mailing Address 487 Groveland Ave

City Highland Park State IL Zip Code 60035-5022

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

Name of Employer Shook Hardy & Bacon Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGDFAV6**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Joan R Bergman**

Mailing Address 77 Lakeview Ter

City Highland Park State IL Zip Code 60035-5041

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : VPF8SG6GHQ3**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 77 Lakeview Ter

City Highland Park State IL Zip Code 60035-5041

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGAZGB4**

Amount of Each Receipt this Period  
10.00

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

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

1020.00

**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 10 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Bishop-Jenkins**

Mailing Address 315 Lockwood Ave

City Northfield State IL Zip Code 60093-3522

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

Name of Employer Marsys Law for Illinois Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : VPF8SG8D054**

Amount of Each Receipt this Period  
 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Bishop-Jenkins**

Mailing Address 315 Lockwood Ave

City Northfield State IL Zip Code 60093-3522

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

Name of Employer Marsys Law for Illinois Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCATQ5**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 2714 Sheridan Rd

City Highland Park State IL Zip Code 60035-1441

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

Name of Employer Kirkland Ellis LLP Occupation Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : VPF8SGB62X9**

Amount of Each Receipt this Period  
 2000.00

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

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

**2100.00**

**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 11 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Leslie Bluhm**

Mailing Address 1300 N State Pkwy  
Apt 502

City Chicago State IL Zip Code 60610-8653

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

Name of Employer JMB Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : VPF8SG5ADN9**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Meredith Bluhm-Wolf**

Mailing Address 2430 N Lakeview Ave  
Apt 2

City Chicago State IL Zip Code 60614-2877

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

Name of Employer LAMB Partners Occupation Office Management/Foundation Work

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2015

**Transaction ID : VPF8SG5RSF9**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 1035 N Dearborn St  
Fl 17

City Chicago State IL Zip Code 60610-2997

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

Name of Employer Belmont Trading Company Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG29M78**

Amount of Each Receipt this Period  
 2700.00

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

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

8100.00

**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 12 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald L. Boorstein**

Mailing Address 1120 Kent Ave

City Highland Park State IL Zip Code 60035-1316

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

Name of Employer Storage Equity Concepts, Inc. Occupation President/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW141**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald J. Borden**

Mailing Address 415 Lambert Tree Ave

City Highland Park State IL Zip Code 60035-5222

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

Name of Employer ECS Financial Occupation Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : VPF8SFXHN34**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 415 Lambert Tree Ave

City Highland Park State IL Zip Code 60035-5222

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

Name of Employer ECS Financial Occupation Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCBH04**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

**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 13 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michelle Bowers**

Mailing Address 1789 Dale Ave

City Highland Park State IL Zip Code 60035-3302

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VPF8SG16WR6**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**James Boyle**

Mailing Address 9849 Keystone Ave

City Skokie State IL Zip Code 60076-1138

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49T7**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**William A Brandt Jr.**

Mailing Address 1134 Sheridan Rd

City Winnetka State IL Zip Code 60093-1538

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

Name of Employer Development Specialties, Inc. Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : VPF8SG5R7T8**

Amount of Each Receipt this Period  
2700.00

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 14 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Clifford E Bregstone**

Mailing Address 310 Rivershire Ct

City Lincolnshire State IL Zip Code 60069-3814

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGC68Y3**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Breyer**

Mailing Address 226 Franklin Rd

City Glencoe State IL Zip Code 60022-1214

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGAZJ00**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1801 Emerson Ave S

City Minneapolis State MN Zip Code 55403-2911

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

Name of Employer US Bank Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2015

**Transaction ID : VPF8SG94J95**

Amount of Each Receipt this Period  
**2200.00**

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

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

**2800.00**

**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 15 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gail Feiger Brown**

Mailing Address 1209 Lincoln Ave S

City Highland Park State IL Zip Code 60035-4101

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

Name of Employer Moraine Township Occupation Township Clerk

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : VPF8SG5R7N8**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Patrice Bugelas-Brandt**

Mailing Address 1134 Sheridan Rd

City Winnetka State IL Zip Code 60093-1538

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

Name of Employer Illinois Arts Council Occupation Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : VPF8SG5R7P6**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 355 Lincolnwood Rd

City Highland Park State IL Zip Code 60035-5213

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

Name of Employer SolarCity Occupation Marketing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : VPF8SG9KQZ8**

Amount of Each Receipt this Period  
250.00

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

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

3200.00

**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 16 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Casey**

Mailing Address 2659 N Orchard St

City Chicago State IL Zip Code 60614-1548

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015

**Transaction ID : VPF8SG7Q6J7**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Cedarbaum**

Mailing Address 1574 Ashland Ave

City Evanston State IL Zip Code 60201-4070

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

Name of Employer Kaplan Center Occupation Jewish Communal Professional

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGF8AE4**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 33106

City Washington State DC Zip Code 20033-0106

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Conduit total listed in Agg. field Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGF8AE4E**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

1500.00



**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 17 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ira Chaplik**

Mailing Address 867 Thackeray Dr

City Highland Park State IL Zip Code 60035-4052

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2015

**Transaction ID : VPF8SG6FXV2**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Clarkson**

Mailing Address 1418 Warson Oaks Ct

City Saint Louis State MO Zip Code 63122-1660

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

Name of Employer Commerce Bancshares Occupation Commercial Banking

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCGJY3**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address 2295 Sheridan Rd

City Highland Park State IL Zip Code 60035-2014

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

Name of Employer Self-Employed Occupation Trader

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2015

**Transaction ID : VPF8SG5TD10**

Amount of Each Receipt this Period  
**250.00**

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

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

**3100.00**

**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 18 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Etahn M Cohen**

Mailing Address 123 Broadway Ave

City Wilmette State IL Zip Code 60091-3462

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

Name of Employer Sugar Felsenthal Grais & Hammer LLP Occupation Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SFR5041**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Etahn M Cohen**

Mailing Address 123 Broadway Ave

City Wilmette State IL Zip Code 60091-3462

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

Name of Employer Sugar Felsenthal Grais & Hammer LLP Occupation Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : VPF8SGAW6X0**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 340 Bluffs Edge Dr

City Lake Forest State IL Zip Code 60045-3304

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : VPF8SG7M5N6**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

**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 19 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jane B. Colman**

Mailing Address 1615 Freesia Ct

City Highland Park State IL Zip Code 60035-5524

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW0S6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Cott**

Mailing Address 1167 Oxford Ct

City Highland Park State IL Zip Code 60035-1033

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

Name of Employer Stericycle, Inc. Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : VPF8SGAVJD1**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 895 Tower Rd

City Winnetka State IL Zip Code 60093-1933

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4AN0**

Amount of Each Receipt this Period  
**100.00**

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

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

**450.00**

**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 20 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jill Cunniff**

Mailing Address 906 Dean Ave

City Highland Park State IL Zip Code 60035-4720

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAP7F5**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Flynn Currie**

Mailing Address 5650 S Harper Ave

City Chicago State IL Zip Code 60637-1832

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

Name of Employer State of Illinois Occupation State Lawmaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : VPF8SFZ4Q65**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1526 N Mohawk St  
1-S

City Chicago State IL Zip Code 60610-6281

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

Name of Employer Holland and Knight LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDM8**

Amount of Each Receipt this Period  
125.00

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

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

875.00

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

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

FOR LINE NUMBER: PAGE 21 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn G. Cutler**

Mailing Address 1526 N Mohawk St  
1-S

City Chicago State IL Zip Code 60610-6281

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

Name of Employer Holland and Knight LLP Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDP4**

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
**Sonja Davidow**

Mailing Address 85 Robles Dr

City Woodside State CA Zip Code 94062-2528

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4AQ6**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 85 Robles Dr

City Woodside State CA Zip Code 94062-2528

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

Name of Employer Mohr, Davidow Ventures Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4AP8**

Amount of Each Receipt this Period  
2700.00

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

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

5525.00

**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 22 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Carol M. Dawley</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 389 Grove St		<b>Transaction ID : VPF8SGCEM04</b>
City Glencoe	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Not Employed	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Lawrie C Dean</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2015
Mailing Address 3204 Rfd		<b>Transaction ID : VPF8SFZZ7A3</b>
City Long Grove	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>C. Abe DeAnda</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 06 / 2015
Mailing Address 41 Hawkes Close		<b>Transaction ID : VPF8SF6Q57</b>
City Irvington	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Cardiothoracic Surgeon	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4200.00
<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 23 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Lawrence Domont</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2015	
Mailing Address 70 Crescent Dr		<b>Transaction ID : VPF8SG3YHT1</b>	
City Glencoe	State IL	Zip Code 60022-1302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Advocate Medical Group	Occupation Physician - LAD		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Lori Dube</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 28 / 2015	
Mailing Address 9318 Avers Ave		<b>Transaction ID : VPF8SG7RQV1</b>	
City Evanston	State IL	Zip Code 60203-1313	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00	
Name of Employer Self-Employed	Occupation Life Coach		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1180.00		

Full Name (Last, First, Middle Initial) <b>C. Deborah Edidin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2015	
Mailing Address 600 Central Ave Ste 212		<b>Transaction ID : VPF8SG413X0</b>	
City Highland Park	State IL	Zip Code 60035-3256	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	680.00
<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 24 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew D Eichner**

Mailing Address 791 Stonegate Dr

City Highland Park State IL Zip Code 60035-5142

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

Name of Employer: Berger Schatz Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1350.00

Date of Receipt: 10 / 22 / 2015

**Transaction ID : VPF8SG12AG3**

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew D Eichner**

Mailing Address 791 Stonegate Dr

City Highland Park State IL Zip Code 60035-5142

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

Name of Employer: Berger Schatz Occupation: Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1450.00

Date of Receipt: 10 / 27 / 2015

**Transaction ID : VPF8SG2DDE4**

Amount of Each Receipt this Period: 100.00

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

Mailing Address 310 Wesley Ave

City Evanston State IL Zip Code 60202-3235

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 05 / 2015

**Transaction ID : VPF8SG975S0**

Amount of Each Receipt this Period: 250.00

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

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

450.00



**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 25 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Engel**

Mailing Address 5413 S Blackstone Ave

City Chicago State IL Zip Code 60615-5406

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : VPF8SG4QTP7**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Erf**

Mailing Address 1391 Sheridan Rd

City Highland Park State IL Zip Code 60035-3406

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

Name of Employer McDermott, Will & Emery LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : VPF8SFZYVY6**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 91 Sycamore Pl

City Highland Park State IL Zip Code 60035-3334

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCGM19**

Amount of Each Receipt this Period  
 200.00

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

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

950.00

**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 26 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Falberg**

Mailing Address 822 Lyster Rd

City Highwood State IL Zip Code 60040-2029

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

Name of Employer Victory Propane Occupation Propane Marketer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAQZ55**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sara Feigenholtz**

Mailing Address 3213 N Wilton Ave  
Apt A

City Chicago State IL Zip Code 60657-2280

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

Name of Employer State of Illinois Occupation State Representative

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2015

**Transaction ID : VPF8SGB64G2**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 156 Indian Tree Dr

City Highland Park State IL Zip Code 60035-5244

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCEKE4**

Amount of Each Receipt this Period  
100.00

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

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

850.00

**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 27 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Filler**

Mailing Address 226 Prospect Ave

City Highland Park State IL Zip Code 60035-3355

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

Name of Employer Jordan Michael Filler Foundation Occupation Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : VPF8SGAXZW2**

Amount of Each Receipt this Period  
 250.00

1050.00

**B.** Full Name (Last, First, Middle Initial)  
**Leslie Finkle**

Mailing Address 1849 Green Bay Rd Apt 2H

City Highland Park State IL Zip Code 60035-3156

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 11 / 2015

**Transaction ID : VPF8SG59PC0**

Amount of Each Receipt this Period  
 250.00

1000.00

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

Mailing Address 5809 N Sacramento Ave

City Chicago State IL Zip Code 60659-4607

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

Name of Employer Trustmark Companies Occupation Vice President, Strategic Growth Ventu

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : VPF8SGAWJE7**

Amount of Each Receipt this Period  
 250.00

500.00

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

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

750.00

**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 28 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ron Foreman**

Mailing Address 332 Skokie Valley Rd

City Highland Park State IL Zip Code 60035-4415

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

Name of Employer Kenron Investments Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SFRY7X0**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Neil Fortunato**

Mailing Address 395 Carol Ct

City Highland Park State IL Zip Code 60035-5201

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

Name of Employer Green Building Technologies Occupation Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2015

**Transaction ID : VPF8SG2DE52**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 199 Cary Ave

City Highland Park State IL Zip Code 60035-4721

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

Name of Employer Self-Employed Occupation Non Profit Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : VPF8SGAW6E2**

Amount of Each Receipt this Period  
 100.00

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

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

1600.00

**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 29 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jeannie Frey**

Mailing Address 2223 Thistle Rd

City State Zip Code  
Glenview IL 60026-7779

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

Name of Employer Occupation  
Presence Health General Counsel

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2015

**Transaction ID : VPF8SGBE5F8**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Patrice S Friedman**

Mailing Address 17 E 83rd St

City State Zip Code  
New York NY 10028-0401

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

Name of Employer Occupation  
PATRICE FRIEDMAN DESIGN L.L.C Interior Designer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2653.07

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2015

**Transaction ID : VPF8SG95KA4**

Amount of Each Receipt this Period  
2653.07

\* In-Kind: Event Catering & Space

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

Mailing Address 1559 Wincanton Dr

City State Zip Code  
Deerfield IL 60015-2341

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

Name of Employer Occupation  
Self-Employed LCSW

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2015

**Transaction ID : VPF8SGB1PH9**

Amount of Each Receipt this Period  
1000.00

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

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

4653.07

**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 30 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ellen Galland**

Mailing Address 408 Lake St

City Evanston State IL Zip Code 60201-4605

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

Name of Employer Rockwell Associates Occupation Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 03 / 2015

**Transaction ID : VPF8SFVN5V6**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bryna G. Gamson**

Mailing Address 2823 Summit Ave

City Highland Park State IL Zip Code 60035-1133

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCEVY6**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2966 Stonegate Ln

City Northbrook State IL Zip Code 60062-4341

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : VPF8SFXHM81**

Amount of Each Receipt this Period  
 1500.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 31 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

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

Mailing Address 2966 Stonegate Ln

City Northbrook State IL Zip Code 60062-4341

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : VPF8SGAXZR0**

Amount of Each Receipt this Period  
 1175.00

2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Teri Gidwitz**

Mailing Address 1133 W Oakdale Ave

City Chicago State IL Zip Code 60657-4319

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCB236**

Amount of Each Receipt this Period  
 25.00

275.00

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

Mailing Address 1535 Rosewood Ave

City Deerfield State IL Zip Code 60015-4769

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

Name of Employer Legal Launch, LLC Occupation Legal Recruiter

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : VPF8SG7RX76**

Amount of Each Receipt this Period  
 36.00

236.00

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

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

1236.00

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

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

FOR LINE NUMBER: PAGE 32 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Glazer**

Mailing Address 1535 Rosewood Ave

City State Zip Code  
Deerfield IL 60015-4769

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

Name of Employer Occupation  
Legal Launch, LLC Legal Recruiter

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
254.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCGKS6**

Amount of Each Receipt this Period  
 18.00

**B.** Full Name (Last, First, Middle Initial)  
**Victor Goetz**

Mailing Address 23 Hampton Ct

City State Zip Code  
Skillman NJ 08558-1808

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

Name of Employer Occupation  
Eli Lilly and Company Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015

**Transaction ID : VPF8SFZTV30**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 107 W 69th St  
Apt 4C

City State Zip Code  
New York NY 10023-5142

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

Name of Employer Occupation  
ABT SRBI Opinion Researcher

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : VPF8SG5R1Y7**

Amount of Each Receipt this Period  
 1000.00

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

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

2018.00



**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 33 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Gorges**

Mailing Address 7033 Palma Ln

City Morton Grove State IL Zip Code 60053-1225

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

Name of Employer @ Properties Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCCZM9**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Todd Grayson**

Mailing Address 299 Hedge Run

City Highland Park State IL Zip Code 60035-5006

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

Name of Employer South Central Bank, NA Occupation Community Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2015

**Transaction ID : VPF8SG724P0**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 737 Park Ave

City Wilmette State IL Zip Code 60091-2501

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

Name of Employer Arriva Dolce Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG48K69**

Amount of Each Receipt this Period  
 250.00

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 34 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gail Guggenheim**

Mailing Address 125 Country Ln

City Highland Park State IL Zip Code 60035-4315

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SG9TYV7**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Michael J. Hamblet**

Mailing Address 1226 Grant Rd

City Northbrook State IL Zip Code 60062-3822

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

Name of Employer Eden Supportive Living Occupation General Manager & Legal Counsel

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : VPF8SG5R1X9**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 545 N Dearborn St  
Apt 1801

City Chicago State IL Zip Code 60654-6543

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2015

**Transaction ID : VPF8SG06F89**

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 35 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Agnes Hamos**

Mailing Address 545 N Dearborn St  
Apt 1801

City Chicago State IL Zip Code 60654-6543

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 18 / 2015

**Transaction ID : VPF8SG6JTS4**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Agnes Hamos**

Mailing Address 545 N Dearborn St  
Apt 1801

City Chicago State IL Zip Code 60654-6543

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 18 / 2015

**Transaction ID : VPF8SGB2RA6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2145 Tanglewood Ct

City Highland Park State IL Zip Code 60035-4231

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

Name of Employer SURS Occupation Symphony Conductor and Composer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VPF8SG29WF0**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 36 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Hayes**

Mailing Address 433 Washington Ave

City State Zip Code  
Glencoe IL 60022-1871

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

Name of Employer Occupation  
McKinsey & Company Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : VPF8SGAXY9**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Adam M Hecht**

Mailing Address 603 Sumac Rd  
Ste 104

City State Zip Code  
Highland Park IL 60035-4449

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

Name of Employer Occupation  
Hecht & Seidman LLC Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCGHX4**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1800 N Wolcott Ave

City State Zip Code  
Chicago IL 60622-1004

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

Name of Employer Occupation  
Sun Belle Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2015

**Transaction ID : VPF8SGA1CH5**

Amount of Each Receipt this Period  
1000.00

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 37 OF 168  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Hersch**

Mailing Address 750 Green Bay Rd

City Highland Park State IL Zip Code 60035-4628

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

Name of Employer Evolve24 Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015

**Transaction ID : VPF8SFXMQ71**

Amount of Each Receipt this Period  
 100.00

1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Sally Higginson**

Mailing Address 490 Hazel Ave

City Highland Park State IL Zip Code 60035-3315

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

Name of Employer Self-Employed Occupation Columnist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2015

**Transaction ID : VPF8SG6JVN5**

Amount of Each Receipt this Period  
 100.00

2650.00

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

Mailing Address 490 Hazel Ave

City Highland Park State IL Zip Code 60035-3315

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

Name of Employer Self-Employed Occupation Columnist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2015

**Transaction ID : VPF8SG7RGG0**

Amount of Each Receipt this Period  
 50.00

2750.00

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

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

250.00

**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 38 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sally Higginson**

Mailing Address 490 Hazel Ave

City Highland Park State IL Zip Code 60035-3315

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

Name of Employer Self-Employed Occupation Columnist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2015

**Transaction ID : VPF8SG7W1J6**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard W Hillsberg**

Mailing Address 950 Rollingwood Road

City Highland Park State IL Zip Code 60035

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

Name of Employer Law Offices of Richard Hillsberg Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4AM2**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lydia Hirsch-Morris**

Mailing Address 415 Milford Rd

City Deerfield State IL Zip Code 60015-4346

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4A87**

Amount of Each Receipt this Period  
250.00

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

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

550.00

**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 39 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jill Hoffman**

Mailing Address 1900 Cavell Ave

City Highland Park State IL Zip Code 60035-2217

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

Name of Employer Office Revolution Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2015

**Transaction ID : VPF8SG5RSV4**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Hoke**

Mailing Address 5506 N Kenmore Ave # 3

City Chicago State IL Zip Code 60640-1516

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2015

**Transaction ID : VPF8SG5RNQ3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 782 Judson Ave

City Highland Park State IL Zip Code 60035-4750

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

Name of Employer Self-Employed Occupation Writer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : VPF8SFZ3K68**

Amount of Each Receipt this Period  
25.00

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

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

525.00

**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 40 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Natalia N. Homedi**

Mailing Address 3235 Techny Rd

City Northbrook State IL Zip Code 60062-6352

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

Name of Employer Atlas Engineering Group, Ltd. Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGC6WA9**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Horner**

Mailing Address 605 Crofton Ave S

City Highland Park State IL Zip Code 60035-3909

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW166**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1957 N Howe St

City Chicago State IL Zip Code 60614-5127

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

Name of Employer Horwitz, Horwitz & Associates Occupation Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : VPF8SGB4XD4**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1300.00**



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

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

FOR LINE NUMBER: PAGE 41 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Clifford Horwitz**

Mailing Address 1957 N Howe St

City Chicago State IL Zip Code 60614-5127

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

Name of Employer Horwitz, Horwitz & Associates Occupation Lawyer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : VPF8SGBT5P9**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Hotchkiss**

Mailing Address 634 Rockland Ave

City Lake Bluff State IL Zip Code 60044-2012

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

Name of Employer Lake Forest College Occupation Former President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : VPF8SG70ZD0**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1479 Saint Tropez Ct

City Highland Park State IL Zip Code 60035-3939

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2015

**Transaction ID : VPF8SG7RX42**

Amount of Each Receipt this Period  
 25.00

Amount of Each Receipt this Period  
 325.00

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

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

525.00

**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 42 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Ingall**

Mailing Address 1990 Watercress Way

City Highland Park State IL Zip Code 60035-5519

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG2M3C0**

Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Insoft**

Mailing Address 1161 Linden Ave

City Highland Park State IL Zip Code 60035-4149

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2015

**Transaction ID : VPF8SG74X44**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 445 E North Water St  
Apt 2701

City Chicago State IL Zip Code 60611-5570

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SG9NEB8**

Amount of Each Receipt this Period  
 100.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 43 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Jahrmarkt**

Mailing Address 30 E 72nd St

City State Zip Code  
New York NY 10021-4265

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

Name of Employer Occupation  
Northlight Financial LLC CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2015

**Transaction ID : VPF8SFXH607**

Amount of Each Receipt this Period  
 1000.00

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Marc Kallish**

Mailing Address 650 Barberry Rd

City State Zip Code  
Highland Park IL 60035-4430

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

Name of Employer Occupation  
Roetzel & Andress Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SFR8RY1**

Amount of Each Receipt this Period  
 500.00

500.00

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

Mailing Address 1305 N Sutton Pl

City State Zip Code  
Chicago IL 60610-2007

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDN6**

Amount of Each Receipt this Period  
 100.00

100.00

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

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

1600.00

1600.00

**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 44 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Martin Karbin**

Mailing Address 540 Cherokee Rd

City Highland Park State IL Zip Code 60035-5258

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2015

**Transaction ID : VPF8SG72XD2**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Terry Horwitz Kass**

Mailing Address 1040 Carlyle Ter

City Highland Park State IL Zip Code 60035-4034

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDW1**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 905 Kings Hwy N

City Cherry Hill State NJ Zip Code 08034-1514

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

Name of Employer Interstate Outdoor Avertising Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : VPF8SFXHNC4**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2200.00**

**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 45 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Marilyn Katz**

Mailing Address 2622 N Hampden Ct

City Chicago State IL Zip Code 60614-1714

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

Name of Employer MK Communications Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGC6XE0**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dennis Kessler**

Mailing Address 3535 Patten Road  
Apt 6BC

City Highland Park State IL Zip Code 60035

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

Name of Employer Midwest Family Business Advisors Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49P5**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1410 N LaSalle St

City Chicago State IL Zip Code 60610

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGB1PC0**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 46 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Kimble**

Mailing Address 241 Wentworth Ave

City State Zip Code  
Glencoe IL 60022-1931

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015

**Transaction ID : VPF8SG02EP7**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Kirsch**

Mailing Address 66 Hazel Ave

City State Zip Code  
Highland Park IL 60035-3307

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

Name of Employer Occupation  
Professional Diversity Network Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015

**Transaction ID : VPF8SFXSC04**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1459 Waverly Rd

City State Zip Code  
Highland Park IL 60035-3413

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

Name of Employer Occupation  
Leopardo Companies Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCB9J8**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 47 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     11e 15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Alfred M. Klairmont**

Mailing Address 263 Park Ave

City Highland Park State IL Zip Code 60035-2523

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

Name of Employer Imperial Realty Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SGA5E80**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Elise Klein**

Mailing Address 385 Dundee Rd

City Glencoe State IL Zip Code 60022-1510

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : VPF8SG49GQ3**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 650 Sumac Rd

City Highland Park State IL Zip Code 60035-4450

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

Name of Employer City of Highland Park Occupation Councilwoman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1084.67

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : VPF8SG2CKE7**

Amount of Each Receipt this Period  
117.78

\* In-Kind: Travel

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

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

1617.78

**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 48 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Alyssa L Knobel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2015	
Mailing Address 650 Sumac Rd		<b>Transaction ID : VPF8SG2CJT9</b>	
City Highland Park	State IL	Zip Code 60035-4450	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee. C		* In-Kind: Parking	
Name of Employer City of Highland Park	Occupation Councilwoman		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1161.67		

Full Name (Last, First, Middle Initial) <b>B. Alyssa L Knobel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2015	
Mailing Address 650 Sumac Rd		<b>Transaction ID : VPF8SG2CJR3</b>	
City Highland Park	State IL	Zip Code 60035-4450	Amount of Each Receipt this Period 205.61
FEC ID number of contributing federal political committee. C		* In-Kind: Event Catering	
Name of Employer City of Highland Park	Occupation Councilwoman		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1367.28		

Full Name (Last, First, Middle Initial) <b>C. Alyssa L Knobel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015	
Mailing Address 650 Sumac Rd		<b>Transaction ID : VPF8SGDFAQ5</b>	
City Highland Park	State IL	Zip Code 60035-4450	Amount of Each Receipt this Period 46.35
FEC ID number of contributing federal political committee. C		* In-Kind: Office Supplies	
Name of Employer City of Highland Park	Occupation Councilwoman		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1413.63		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	328.96
<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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 49 OF 168

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Alyssa L Knobel**  
 Mailing Address 650 Sumac Rd  
 City Highland Park State IL Zip Code 60035-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer City of Highland Park Occupation Councilwoman  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1501.41**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : VPF8SGB57M1**  
 Amount of Each Receipt this Period  
 78.81  
 \* In-Kind: Food for Meeting

**B.** Full Name (Last, First, Middle Initial)  
**Alyssa L Knobel**  
 Mailing Address 650 Sumac Rd  
 City Highland Park State IL Zip Code 60035-4450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer City of Highland Park Occupation Councilwoman  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1501.41**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : VPF8SGB57N9**  
 Amount of Each Receipt this Period  
 8.97  
 \* In-Kind: Office Supplies

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Kohl**  
 Mailing Address 7503 Fairfax Rd  
 City Bethesda State MD Zip Code 20814-1311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Baker Hostetler Occupation Senior Advisor  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015  
**Transaction ID : VPF8SGF8AF2**  
 Amount of Each Receipt this Period  
 500.00  
 \* Earmarked Contribution: See Below

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

587.78

**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 50 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

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

Mailing Address **PO Box 33106**

City **Washington** State **DC** Zip Code **20033-0106**

FEC ID number of contributing federal political committee. **C C00441949**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4600.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		31		2015

**Transaction ID : VPF8SGF8AF2E**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Harvey Koloms**

Mailing Address **1620 Freesia Ct**

City **Highland Park** State **IL** Zip Code **60035-5524**

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		08		2015

**Transaction ID : VPF8SFZTVB3**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **1011 Saxony Dr**

City **Highland Park** State **IL** Zip Code **60035-4048**

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

Name of Employer Occupation  
**Banner Day Camp** Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		05		2015

**Transaction ID : VPF8SG97605**

Amount of Each Receipt this Period  
**250.00**

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

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

**350.00**

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carol L Kraines**

Mailing Address 325 Forsythia Dr

City State Zip Code  
Deerfield IL 60015-4603

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**351.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2015**

**Transaction ID : VPF8SG31M71**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carol L Kraines**

Mailing Address 325 Forsythia Dr

City State Zip Code  
Deerfield IL 60015-4603

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**401.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2015**

**Transaction ID : VPF8SG7EPR6**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 325 Forsythia Dr

City State Zip Code  
Deerfield IL 60015-4603

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**451.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 23 / 2015**

**Transaction ID : VPF8SGBWCY2**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

**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 52 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carol L Kraines**

Mailing Address 325 Forsythia Dr

City State Zip Code  
Deerfield IL 60015-4603

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
501.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 30 2015

**Transaction ID : VPF8SGCB1W0**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Lisa Kritz**

Mailing Address 3083 Priscilla Ave

City State Zip Code  
Highland Park IL 60035-1243

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

Name of Employer Occupation  
EverThrive IL Public Health

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 21 2015

**Transaction ID : VPF8SG74B96**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2939 Lake Placid Ln

City State Zip Code  
Northbrook IL 60062-4330

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 09 2015

**Transaction ID : VPF8SGA5EH1**

Amount of Each Receipt this Period  
500.00

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

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

600.00

**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 53 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Bennett Lasko**

Mailing Address 1459 Linden Ave

City Highland Park State IL Zip Code 60035-3420

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

Name of Employer Drinker Biddle & Reath LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **470.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : VPF8SG6GCE0**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Bennett Lasko**

Mailing Address 1459 Linden Ave

City Highland Park State IL Zip Code 60035-3420

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

Name of Employer Drinker Biddle & Reath LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **490.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGAZH41**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 1544 Sheridan Rd

City Highland Park State IL Zip Code 60035-3447

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

Name of Employer BPI Occupation Policy Analyst

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2015

**Transaction ID : VPF8SG68FN9**

Amount of Each Receipt this Period  
**500.00**

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

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

**540.00**

**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 54 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Lebovitz**

Mailing Address 288 Concord Rd

City Weston State MA Zip Code 02493-1311

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

Name of Employer CBL & Associates Properties Inc Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG3YJ32**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sara S Leopold**

Mailing Address 72 E Canterbury Ln

City Northfield State IL Zip Code 60093-3157

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : VPF8SG5R202**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 509 W Wellington Ave

City Chicago State IL Zip Code 60657-5420

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG2KNQ6**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 55 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

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

Mailing Address 3345 Old Mill Rd

City Highland Park State IL Zip Code 60035-1006

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

Name of Employer UIC Occupation Professor Emerita

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGC6A67**

Amount of Each Receipt this Period  
 100.00

1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Lifestyles by Joe c/o Guli Enterprises LLC**

Mailing Address 474 N Lake Shore Dr Apt 1708

City Chicago State IL Zip Code 60611-6460

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49X0**

Amount of Each Receipt this Period  
 300.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 474 N Lake Shore Dr Apt 1708

City Chicago State IL Zip Code 60611-6460

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

Name of Employer Guli Enterprises Occupation Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC4A62**

Amount of Each Receipt this Period  
 300.00

**[MEMO ITEM]**

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 56 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Lippai**

Mailing Address 3487 Summit Ave

City Highland Park State IL Zip Code 60035-1111

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

Name of Employer Combined insurance Occupation Actuary

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGDFB14**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Howard L Lipton**

Mailing Address 943 Sheridan Rd

City Highland Park State IL Zip Code 60035-4705

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

Name of Employer University of Illinois at Chicago Occupation Neurologist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 14 / 2015

**Transaction ID : VPF8SG02EF1**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 500 College Rd

City Lake Forest State IL Zip Code 60045-2320

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : VPF8SG49C87**

Amount of Each Receipt this Period  
500.00

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

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

1250.00



**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 57 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jay Luchsinger**

Mailing Address 5324 S Blackstone Ave

City Chicago State IL Zip Code 60615-4505

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

Name of Employer Horwitz, Horwitz & Associates Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : VPF8SGBDDQ9**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mardie P. MacKimm**

Mailing Address 22 Lakeview Ter

City Highland Park State IL Zip Code 60035-5042

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : VPF8SGB61Q1**

Amount of Each Receipt this Period  
800.00

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

Mailing Address 22 Lakeview Ter

City Highland Park State IL Zip Code 60035-5042

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : VPF8SGBRM01**

Amount of Each Receipt this Period  
200.00

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

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

1250.00

**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 58 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David Macknin**

Mailing Address 1752 Ryders Ln

City Highland Park State IL Zip Code 60035-2107

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

Name of Employer Alper Services Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : VPF8SGB61S6**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**H. George Mann**

Mailing Address 1186 Linden Ave

City Highland Park State IL Zip Code 60035-4150

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : VPF8SG47J75**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2121 Noyes St

City Evanston State IL Zip Code 60201-2557

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

Name of Employer Marco Consulting Group Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2015

**Transaction ID : VPF8SG7RM92**

Amount of Each Receipt this Period  
**1700.00**

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

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

**2050.00**

**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 59 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Roslyn Marks**

Mailing Address 255 N Deere Park Dr E

City Highland Park State IL Zip Code 60035-5343

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : VPF8SG8AX19**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Roslyn Marks**

Mailing Address 255 N Deere Park Dr E

City Highland Park State IL Zip Code 60035-5343

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : VPF8SG8AX27**

Amount of Each Receipt this Period  
1950.00

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

Mailing Address 900 Summit Dr

City Deerfield State IL Zip Code 60015-1821

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

Name of Employer Segal McCambridge Singer & Mahoney Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2015

**Transaction ID : VPF8SG12VK1**

Amount of Each Receipt this Period  
100.00

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

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

2100.00

**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 60 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Karen May**

Mailing Address 460 Hazel Ave

City Highland Park State IL Zip Code 60035-3315

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49V5**

Amount of Each Receipt this Period  
 250.00

500.00

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

Mailing Address 525 Sheridan Rd

City Kenilworth State IL Zip Code 60043-1222

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : VPF8SG70Z73**

Amount of Each Receipt this Period  
 750.00

2250.00

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

Mailing Address 1300 N State Pkwy Apt 1102

City Chicago State IL Zip Code 60610-8658

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

Name of Employer GCM Grosvenor Occupation Vice Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 11 / 2015

**Transaction ID : VPF8SG58EM9**

Amount of Each Receipt this Period  
 1000.00

1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 61 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lois Melvoin**

Mailing Address 966 Wildwood Ln

City Highland Park State IL Zip Code 60035-4128

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW133**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Abner J. Mikva**

Mailing Address 2960 N Lake Shore Dr  
Apt 2400

City Chicago State IL Zip Code 60657-5661

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDA2**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 2295 Sheridan Rd

City Highland Park State IL Zip Code 60035-2014

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SGA0T60**

Amount of Each Receipt this Period  
**100.00**

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

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

**750.00**

**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 62 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Miller**

Mailing Address 925 Forestway Dr

City State Zip Code  
Glencoe IL 60022-1417

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

Name of Employer Occupation  
Glencoe Trustee

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 19 / 2015

**Transaction ID : VPF8SGB6769**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lee I Miller**

Mailing Address 11 E Walton St  
Apt 3502

City State Zip Code  
Chicago IL 60611-5437

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

Name of Employer Occupation  
DLA Piper LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : VPF8SG174H9**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 850 W Chalmers Pl

City State Zip Code  
Chicago IL 60614-3223

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

Name of Employer Occupation  
Miner, Barnhill & Galland Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 02 / 2015

**Transaction ID : VPF8SG8Z1Z3**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

**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 63 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Molinar**

Mailing Address 405 Dundee Rd

City State Zip Code  
Glencoe IL 60022-1581

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

Name of Employer Occupation  
Walgreens Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2015

**Transaction ID : VPF8SGCCHR2**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Molner**

Mailing Address 217 W 13th St

City State Zip Code  
New York NY 10011-7714

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

Name of Employer Occupation  
Kramer & Levin Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : VPF8SFXXQ17**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 815 Rice St

City State Zip Code  
Highland Park IL 60035-4738

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
231.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : VPF8SG2KKB7**

Amount of Each Receipt this Period  
200.00

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

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

550.00

**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 64 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Adi Mor**

Mailing Address 67 Laurel Ave

City Highland Park State IL Zip Code 60035-2615

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

Name of Employer Garden Fresh Market Occupation Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW0P2**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Edward Mullen**

Mailing Address 3843 N Southport Ave Apt 2S

City Chicago State IL Zip Code 60613-6319

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGB4X03**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 600 Central Ave Ste 385

City Highland Park State IL Zip Code 60035-3257

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

Name of Employer Fulton Developers Occupation Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2015

**Transaction ID : VPF8SG74DG5**

Amount of Each Receipt this Period  
 150.00

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

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

900.00



**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 65 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A. Cynde Munzer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 Hastings Ave  
 City Highland Park State IL Zip Code 60035-5158  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Aronberg Goldgehn Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015  
**Transaction ID : VPF8SG2KP23**  
 Amount of Each Receipt this Period  
 100.00

**B. Toby S Myerson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1055 5th Ave Apt 4AB  
 City New York State NY Zip Code 10028-0109  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Paul Weiss Rifkind Wharton & Garrison Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015  
**Transaction ID : VPF8SFZTV22**  
 Amount of Each Receipt this Period  
 1000.00

**C. David J. Narefsky Esq.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2054 N Racine Ave  
 City Chicago State IL Zip Code 60614-4014  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Mayer Brown Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : VPF8SG16W30**  
 Amount of Each Receipt this Period  
 250.00

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

1350.00

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

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

FOR LINE NUMBER: PAGE 66 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Rachna Narula**

Mailing Address 2441 Woodbridge Ln

City Highland Park State IL Zip Code 60035-2022

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

Name of Employer Universal Granite & Marble Occupation Administrative Manager

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 02 / 2015

**Transaction ID : VPF8SFVHME3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Walter R. Nathan**

Mailing Address 330 Beech St

City Highland Park State IL Zip Code 60035-4134

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

Name of Employer Blue Ribbon Fastener Occupation Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : VPF8SFXHN42**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 3180 N Lake Shore Dr Apt 7H

City Chicago State IL Zip Code 60657-4864

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

Name of Employer Levin & Schreder Ltd Occupation Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SGA5E72**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 450.00

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

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

\_\_\_\_\_ 950.00

\_\_\_\_\_

**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 67 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gerhart Netzer**

Mailing Address 1250 Ridgewood Dr

City Highland Park State IL Zip Code 60035-4026

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGDFAX2**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Grace A Newton**

Mailing Address 2135 N Cleveland Ave

City Chicago State IL Zip Code 60614-4508

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

Name of Employer Law Office of Grace Allen Newton Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : VPF8SG418V5**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 7033 Palma Ln

City Morton Grove State IL Zip Code 60053-1225

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SG02DV3**

Amount of Each Receipt this Period  
**500.00**

PARTNERSHIP--partners below if itemized

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

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

**1600.00**

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

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

FOR LINE NUMBER: PAGE 68 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Gorges**

Mailing Address 7033 Palma Ln

City Morton Grove State IL Zip Code 60053-1225

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

Name of Employer @ Properties Occupation Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SG02DW1**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Martha Nussbaum**

Mailing Address 4950 S Chicago Beach Dr Apt 10B

City Chicago State IL Zip Code 60615-3204

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

Name of Employer University of Chicago Occupation Professor of Law and Philosophy

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : VPF8SG9MNA7**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1139 W Wellington Ave

City Chicago State IL Zip Code 60657-4337

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

Name of Employer Wheaton Franciscan Occupation Physician

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2015

**Transaction ID : VPF8SG30XQ8**

Amount of Each Receipt this Period  
 200.00

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

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

450.00

**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 69 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Beth J. Olderman**

Mailing Address 400 Sheridan Rd

City Highland Park State IL Zip Code 60035-5352

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

Name of Employer Kidoodles Inc/Initial It Gifts Occupation Sales Associate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **278.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SGA5E56**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edward Oppenheimer**

Mailing Address 1501 N State Pkwy Apt 11B

City Chicago State IL Zip Code 60610-5737

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : VPF8SG9N458**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 120 Crescent Dr

City Glencoe State IL Zip Code 60022-1304

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : VPF8SG2DDR0**

Amount of Each Receipt this Period  
**500.00**

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

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

**1100.00**

**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 70 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jonah Orlofsky**

Mailing Address 302 Grove St

City State Zip Code  
Glencoe IL 60022-2021

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2015

**Transaction ID : VPF8SGB6735**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Matt S Pestine**

Mailing Address 340 Moraine Rd.

City State Zip Code  
Highland Park IL 60035

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

Name of Employer Occupation  
Waukegan Public Schools Teacher

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
267.38

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2015

**Transaction ID : VPF8SGB5728**

Amount of Each Receipt this Period  
67.38

\* In-Kind: Event Supplies

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

Mailing Address 1760 Telegraph Rd

City State Zip Code  
Bannockburn IL 60015-1860

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

Name of Employer Occupation  
Metaphrasis Language & Cultural Soluti Medical Interpreter

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2015

**Transaction ID : VPF8SGAW0X7**

Amount of Each Receipt this Period  
100.00

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

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

1167.38

**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 71 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Sheila Pickett</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015
Mailing Address 5309 Eileen Dr		<b>Transaction ID : VPF8SG7TCZ5</b>
City San Jose	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.00
Name of Employer ServiceNow	Occupation Marketing	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 254.00	

Full Name (Last, First, Middle Initial) <b>B. Daniel Pierce</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2015
Mailing Address 906 Chaucer Ln		<b>Transaction ID : VPF8SG10HR4</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer North Shore Sanitary District	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ilana Platt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2015
Mailing Address 29 Sheridan Rd		<b>Transaction ID : VPF8SG3YHP9</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Volunteer	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	454.00
<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: PAGE 72 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gerhard Pleuhs**

Mailing Address 215 Sheridan Rd

City Highland Park      State IL      Zip Code 60035-5365

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

Name of Employer Mondelez International      Occupation Executive VP & General Counsel

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : VPF8SGB4X45**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Cynthia Plouche**

Mailing Address 1852 Dale Ave

City Highland Park      State IL      Zip Code 60035-3305

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

Name of Employer Moraine Township      Occupation Assessor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2015

**Transaction ID : VPF8SG971V6**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2141 Mallard Dr

City Northbrook      State IL      Zip Code 60062-6600

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

Name of Employer Podolsky Circle      Occupation Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCDFT1**

Amount of Each Receipt this Period  
**100.00**

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

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

**550.00**



**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 73 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Polacheck**

Mailing Address 302 Grove St

City State Zip Code  
Glencoe IL 60022-2021

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

Name of Employer Occupation  
McDermott Will & Emery, LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2015

**Transaction ID : VPF8SFZYZW9**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Christine Pope**

Mailing Address 544 Park Ave

City State Zip Code  
Glencoe IL 60022-1502

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

Name of Employer Occupation  
J&R CATERING Event Planner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2015

**Transaction ID : VPF8SG2DDD6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1347 Sunview Ln

City State Zip Code  
Winnetka IL 60093-1624

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

Name of Employer Occupation  
Ease Commercial Services Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2015

**Transaction ID : VPF8SG879D0**

Amount of Each Receipt this Period  
50.00

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

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

1300.00

**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 74 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Redfield**

Mailing Address 1341 Lincoln Ave S

City Highland Park State IL Zip Code 60035-3460

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

Name of Employer Dr. Mellovitz Occupation Dental Hygienist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SG9NFC7**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Michelle Rehbein**

Mailing Address 5304 Grand Ave S

City Minneapolis State MN Zip Code 55419-1359

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

Name of Employer Stinson Leonard Street LLP Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SG988G1**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 178 Prospect Ave

City Highland Park State IL Zip Code 60035-3355

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49W3**

Amount of Each Receipt this Period  
**100.00**

**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 75 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Elliott H Robbins**

Mailing Address 812 Elmwood Ave

City State Zip Code  
Wilmette IL 60091-1708

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

Name of Employer Occupation  
Robbins & Robbins LTD Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SGA0T52**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anne Rodgers**

Mailing Address 629 Heights Blvd

City State Zip Code  
Houston TX 77007-2523

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

Name of Employer Occupation  
Norton Rose Fulbright US LLP Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2015

**Transaction ID : VPF8SG7RE16**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 376 Hazel Ave

City State Zip Code  
Highland Park IL 60035-3313

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

Name of Employer Occupation  
The Private Bank Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2015

**Transaction ID : VPF8SG31RT8**

Amount of Each Receipt this Period  
150.00

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

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

750.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 76 OF 168

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carol Ronen**

Mailing Address 6033 N Sheridan Rd

City Chicago State IL Zip Code 60660-3003

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

Name of Employer 9th Congressional District Occupation Committeewoman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : VPF8SG3QS33**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrea Rosengarden**

Mailing Address 1600 Skokie Blvd

City Northbrook State IL Zip Code 60062-4129

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

Name of Employer Self-Employed Occupation Community Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 24 / 2015

**Transaction ID : VPF8SGBXKR9**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 180 E Pearson St Apt 6301

City Chicago State IL Zip Code 60611-2136

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

Name of Employer Namtor, Inc. Occupation Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGF8AJ5**

Amount of Each Receipt this Period  
 2500.00

\* Earmarked Contribution: See Below

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

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

5450.00

**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 77 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

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

Mailing Address **PO Box 33106**

City **Washington** State **DC** Zip Code **20033-0106**

FEC ID number of contributing federal political committee. **C C00441949**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2015**

**Transaction ID : VPF8SGF8AJ5E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2500.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Gabrielle M. Rousso**

Mailing Address **3339 Dato Ave**

City **Highland Park** State **IL** Zip Code **60035-1254**

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

Name of Employer **The Art Center** Occupation **Executive Director**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2015**

**Transaction ID : VPF8SGCGZ29**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **150.00**

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

Mailing Address **325 Orchard Ln**

City **Highland Park** State **IL** Zip Code **60035-1939**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 12 / 2015**

**Transaction ID : VPF8SG5R1Z4**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

**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 78 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Galya Ruffer**

Mailing Address 224 Park Ave

City Highland Park State IL Zip Code 60035-2524

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

Name of Employer Northwestern Occupation Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2015

**Transaction ID : VPF8SG8NNW3**

Amount of Each Receipt this Period  
 1000.00

1200.00

**B.** Full Name (Last, First, Middle Initial)  
**Lowell Sachnoff**

Mailing Address 1044 Lake Shore Blvd Ste 4000

City Evanston State IL Zip Code 60202-1433

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2015

**Transaction ID : VPF8SGAABA0**

Amount of Each Receipt this Period  
 100.00

600.00

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

Mailing Address 165 Meadow Ln N

City Golden Valley State MN Zip Code 55422-5304

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

Name of Employer LEONARD, STREET & DEINARD Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SGA0TA1**

Amount of Each Receipt this Period  
 250.00

250.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 79 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Satterthwaite**

Mailing Address 450 Davis St  
Unit 751

City Evanston State IL Zip Code 60201-7603

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

Name of Employer Northwestern University Occupation Professor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2015

**Transaction ID : VPF8SGAD927**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jo Sawyer**

Mailing Address 922 Forest Ave

City Wilmette State IL Zip Code 60091-1720

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

Name of Employer Insight, Inc. Occupation Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : VPF8SFR4ZP1**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1024 Old Elm Pl

City Glencoe State IL Zip Code 60022-1233

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

Name of Employer Sentinel Travel Occupation Self-Employed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : VPF8SG86VK9**

Amount of Each Receipt this Period  
 100.00

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

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

1100.00

**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 80 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Claudia Schwartz**

Mailing Address 585 Stonegate Ter

City Glencoe	State IL	Zip Code 60022-1435
-----------------	-------------	------------------------

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

Name of Employer none	Occupation retired
--------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SG9K5M3**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Howard Schwarzbach**

Mailing Address 718 Sheridan Rd

City Glencoe	State IL	Zip Code 60022-1339
-----------------	-------------	------------------------

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

Name of Employer VIN Chicago	Occupation Founder
---------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW0V1**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6910 S Euclid Ave

City Chicago	State IL	Zip Code 60649-1512
-----------------	-------------	------------------------

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

Name of Employer Kaye Scholer	Occupation Attorney
----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : VPF8SG47J00**

Amount of Each Receipt this Period  
250.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 81 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Laurence Segil**

Mailing Address 80 Lakeview Ter

City Highland Park State IL Zip Code 60035-5042

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2015

**Transaction ID : VPF8SG062W0**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Isaac Serotta**

Mailing Address 507 Warwick Rd

City Deerfield State IL Zip Code 60015-3345

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

Name of Employer Lakeside Congregation Occupation Rabbi

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : VPF8SGBRR58**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 265 E Westleigh Rd

City Lake Forest State IL Zip Code 60045-3041

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCEVW0**

Amount of Each Receipt this Period  
**2700.00**

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

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

**2900.00**

**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 82 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Myrna Shaw**

Mailing Address 265 Maple Ave

City Highland Park State IL Zip Code 60035-2055

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

Name of Employer Lake Shore Travel Occupation Travel Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2015

**Transaction ID : VPF8SGC5PE9**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Rick Shoemaker**

Mailing Address 1488 Old Skokie Rd

City Highland Park State IL Zip Code 60035-3032

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

Name of Employer Rick's Autocare and Collision Repair Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VPF8SGCEW27**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 247 Franklin Rd

City Glencoe State IL Zip Code 60022-1213

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

Name of Employer Jenner & Block Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : VPF8SG7FF68**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 83 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Glen Silverstein**

Mailing Address 229 Ferndale Rd

City State Zip Code  
Scarsdale NY 10583-1531

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

Name of Employer Occupation  
Leader & Berkon LLP Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : VPF8SFXCCF9**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dick Simpson**

Mailing Address 2218 W Leland Ave  
Apt 2

City State Zip Code  
Chicago IL 60625-2006

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

Name of Employer Occupation  
UIC Professor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2015

**Transaction ID : VPF8SGC49R1**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 254 Leslee Ln

City State Zip Code  
Highland Park IL 60035-5246

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : VPF8SG0YR54**

Amount of Each Receipt this Period  
50.00

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 84 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David Smolensky**

Mailing Address 3550 University Ave

City Highland Park State IL Zip Code 60035-1153

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

Name of Employer Resolute Consulting Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015

**Transaction ID : VPF8SG2KH30**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald S Sonenthal**

Mailing Address 2760 Priscilla Ave

City Highland Park State IL Zip Code 60035-1340

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

Name of Employer Deloitte Occupation Accountant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : VPF8SG3TBJ3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

Mailing Address 1330 W Cornelia Ave

City Chicago State IL Zip Code 60657-1402

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

Name of Employer Parts & Spencer Ltd. Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAW0W9**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

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

\_\_\_\_\_ 1750.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 85 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Spungen**

Mailing Address 660 Judson Ave

City Highland Park State IL Zip Code 60035-5034

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

Name of Employer Self-Employed Occupation Bio-Tech Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 02 / 2015**

**Transaction ID : VPF8SFTTRA9**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert E. Stanley**

Mailing Address 2601 Hybernia Dr

City Highland Park State IL Zip Code 60035-5513

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 08 / 2015**

**Transaction ID : VPF8SG9MSH9**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1531 Sheridan Rd

City Highland Park State IL Zip Code 60035-3444

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

Name of Employer JLL Occupation Commercial Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2015**

**Transaction ID : VPF8SG5RT04**

Amount of Each Receipt this Period  
**500.00**

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

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

**1100.00**

**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 86 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Steinmeyer**

Mailing Address 1531 Sheridan Rd

City Highland Park State IL Zip Code 60035-3444

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

Name of Employer JLL Occupation Commercial Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2015

**Transaction ID : VPF8SGAXAZ2**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Adam Stolberg**

Mailing Address 1686 Ridgelee Rd

City Highland Park State IL Zip Code 60035-4438

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

Name of Employer Advantage Management Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2015

**Transaction ID : VPF8SFZ05B2**

Amount of Each Receipt this Period  
**600.00**

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

Mailing Address 1686 Ridgelee Rd

City Highland Park State IL Zip Code 60035-4438

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2015

**Transaction ID : VPF8SFZ05R5**

Amount of Each Receipt this Period  
**500.00**

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

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

**1300.00**

**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 87 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Samantha Stolberg**

Mailing Address 1686 Ridgelee Rd

City Highland Park State IL Zip Code 60035-4438

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : VPF8SG5AB17**

Amount of Each Receipt this Period  
**1100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Samantha Stolberg**

Mailing Address 1686 Ridgelee Rd

City Highland Park State IL Zip Code 60035-4438

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : VPF8SGAQS11**

Amount of Each Receipt this Period  
**1100.00**

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

Mailing Address 6108 Arctic Way

City Edina State MN Zip Code 55436-1806

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

Name of Employer Stinson Leonard Street LLP Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2015

**Transaction ID : VPF8SGA0T77**

Amount of Each Receipt this Period  
**250.00**

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

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

**2450.00**

**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 88 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Strusiner**

Mailing Address 1424 Waverly Rd

City Highland Park State IL Zip Code 60035-3411

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

Name of Employer Occupation  
Craig Steven Development Corporation Real Estate Developer/Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2015

**Transaction ID : VPF8SG31FY1**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Barry Sullivan**

Mailing Address 5555 S Everett Ave  
Apt A1-2

City Chicago State IL Zip Code 60637-1968

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

Name of Employer Occupation  
Loyola University Chicago School of La Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015

**Transaction ID : VPF8SG7QRM0**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1430 N Lake Shore Dr  
Apt 23

City Chicago State IL Zip Code 60610-1753

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

Name of Employer Occupation  
CITIGROUP Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2015

**Transaction ID : VPF8SFXHMT3**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00



**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 89 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Tamkin**

Mailing Address 395 Dundee Rd

City State Zip Code  
Glencoe IL 60022-1510

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2015

**Transaction ID : VPF8SG49GS9**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Tenner**

Mailing Address 4205 N Sheridan Rd  
Apt G

City State Zip Code  
Chicago IL 60613-4901

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

Name of Employer Occupation  
Chicago Regional Council of Carpenters Communications Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : VPF8SGBSC92**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1670 Edgewood Rd

City State Zip Code  
Highland Park IL 60035-3828

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2015

**Transaction ID : VPF8SG2H3G8**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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: PAGE 90 OF 168  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carrie M Travers**

Mailing Address 541 Turicum Rd

City State Zip Code  
Lake Forest IL 60045-3365

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

Name of Employer Occupation  
Self-Employed Community Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015

**Transaction ID : VPF8SG490N2**

Amount of Each Receipt this Period  
700.00

**B.** Full Name (Last, First, Middle Initial)  
**Joel Treisman**

Mailing Address 4 E Meadow Rd

City State Zip Code  
Westport CT 06880-3011

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

Name of Employer Occupation  
Tiger 21 Group Chair

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : VPF8SG70ZM4**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2257 Shannondale Rd

City State Zip Code  
Libertyville IL 60048-1149

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : VPF8SG7M5S7**

Amount of Each Receipt this Period  
250.00

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

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

1950.00

**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 91 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Turner**

Mailing Address 1700 Foothill Rd

City	State	Zip Code
Ojai	CA	93023-1751

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

Name of Employer	Occupation
RT Specialty INS	President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : VPF8SGBVQ19**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Tim W Turner**

Mailing Address 1700 Foothill Rd

City	State	Zip Code
Ojai	CA	93023-1751

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

Name of Employer	Occupation
RT Specialty	President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2015

**Transaction ID : VPF8SFYWE10**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 727 Roslyn Ter

City	State	Zip Code
Evanston	IL	60201-1721

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

Name of Employer	Occupation
Self-Employed	Artist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015

**Transaction ID : VPF8SG3RER1**

Amount of Each Receipt this Period  
500.00

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

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

3800.00

**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 92 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Maryann M. Valiulis**

Mailing Address 383 Hastings Ave

City Highland Park State IL Zip Code 60035-5155

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCJV27**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lee Vickman**

Mailing Address 3535 Patten Rd  
Apt 1C

City Highland Park State IL Zip Code 60035-5957

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2015

**Transaction ID : VPF8SG74BZ0**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2637 North Bosworth Avenue

City Chicago State IL Zip Code 60614

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2015

**Transaction ID : VPF8SGBYSD3**

Amount of Each Receipt this Period  
**500.00**

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

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

**700.00**

**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 93 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Herbert Wander**

Mailing Address 70 Prospect Ave

City Highland Park State IL Zip Code 60035-3329

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

Name of Employer Katten Muchin Rosenman LLP Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 02 / 2015

**Transaction ID : VPF8SFTTPZ1**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Karen Wander**

Mailing Address 70 Prospect Ave

City Highland Park State IL Zip Code 60035-3329

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : VPF8SGBT6J0**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 2811 Lexington Ln

City Highland Park State IL Zip Code 60035-1025

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2015

**Transaction ID : VPF8SGBZ1Q9**

Amount of Each Receipt this Period  
**350.00**

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

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

**1350.00**

**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 94 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Bernice Weissbourd**

Mailing Address 2737 Sheridan Rd

City State Zip Code  
Evanston IL 60201-1727

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

Name of Employer Occupation  
Family Focus President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2015

**Transaction ID : VPF8SG0S630**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth A Wexler**

Mailing Address 468 Lakeside Ter

City State Zip Code  
Glencoe IL 60022-1759

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

Name of Employer Occupation  
Wexler Wallace LP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VPF8SGCEWG8**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 840 Walden Ln

City State Zip Code  
Lake Forest IL 60045-3318

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2015

**Transaction ID : VPF8SGAACYS**

Amount of Each Receipt this Period  
500.00

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

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

1450.00

**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 95 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sallyan Windt**

Mailing Address 200 Roger Williams Ave

City Highland Park State IL Zip Code 60035-4743

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : VPF8SG7FSA1**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Wolk**

Mailing Address 174 Leonard Wood S Apt 110

City Highland Park State IL Zip Code 60035-5951

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

Name of Employer Coldwell Banker Commercial Occupation Senior Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : VPF8SG9PS78**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1119 Sheridan Rd

City Winnetka State IL Zip Code 60093-1537

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

Name of Employer Self-Employed Occupation Freelance Writer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : VPF8SG7M5K0**

Amount of Each Receipt this Period  
1000.00

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

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

3800.00

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

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

FOR LINE NUMBER: PAGE 96 OF 168  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sally B. Young**

Mailing Address 555 Drexel Ave

City State Zip Code  
Glencoe IL 60022-2067

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

Name of Employer Occupation  
Lundbeck LLC Public Affairs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGCGJJ8**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Carole Yuster**

Mailing Address 74 Central Ave

City State Zip Code  
Highland Park IL 60035-2609

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

Name of Employer Occupation  
K-9 Reading Buddies of the North Shore Executive Director & Founder

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2015

**Transaction ID : VPF8SG8D0Q6**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 840 Kimballwood Ln

City State Zip Code  
Highland Park IL 60035-3624

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

Name of Employer Occupation  
Moraine Township Trustee

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2015

**Transaction ID : VPF8SG4YQD5**

Amount of Each Receipt this Period  
250.00

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

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

600.00



**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 97 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mark A. Zivin**

Mailing Address 1637 Judson Ave

City Evanston State IL Zip Code 60201-4660

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

Name of Employer Morrison & Morrison, Ltd. Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGF8AK3**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 33106

City Washington State DC Zip Code 20033-0106

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : VPF8SGF8AK3E**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 1243 Ridge Rd

City Highland Park State IL Zip Code 60035-2931

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

Name of Employer CEO Occupation Zookbinders Inc.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015

**Transaction ID : VPF8SG7QJB6**

Amount of Each Receipt this Period  
200.00

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

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

1200.00

140777.97

**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 98 OF 168
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Nancy Rotering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015
Mailing Address 46 Lakeview Ter		<b>Transaction ID : VPF8SG7FVR5</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C H6IL10135		Amount of Each Receipt this Period 265.75
Name of Employer City of Highland Park	Occupation Mayor	* In-Kind: Food for Event
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1376.45	

Full Name (Last, First, Middle Initial) <b>B. Nancy Rotering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2015
Mailing Address 46 Lakeview Ter		<b>Transaction ID : VPF8SGB57T9</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C H6IL10135		Amount of Each Receipt this Period 111.32
Name of Employer City of Highland Park	Occupation Mayor	* In-Kind: Event Supplies
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1487.77	

Full Name (Last, First, Middle Initial) <b>C. Nancy Rotering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 07 / 2015
Mailing Address 46 Lakeview Ter		<b>Transaction ID : VPF8SGF0CM2</b>
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C H6IL10135		Amount of Each Receipt this Period 552.40
Name of Employer City of Highland Park	Occupation Mayor	* In-Kind: Travel
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2040.17	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	929.47
<b>TOTAL</b> This Period (last page this line number only).....	929.47

**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 99 OF 168
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Nancy Rotering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 46 Lakeview Ter		<b>Transaction ID : VPF8SGC49K1</b>
City Highland Park      State IL      Zip Code 60035-5042	Amount of Each Receipt this Period 75000.00	
FEC ID number of contributing federal political committee. <b>C H6IL10135</b>	Name of Employer City of Highland Park      Occupation Mayor	HELOC from US Bank
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 345000.00	

Full Name (Last, First, Middle Initial) <b>B. Nancy Rotering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2015
Mailing Address 46 Lakeview Ter		<b>Transaction ID : VPF8SGC49M9</b>
City Highland Park      State IL      Zip Code 60035-5042	Amount of Each Receipt this Period 25000.00	
FEC ID number of contributing federal political committee. <b>C H6IL10135</b>	Name of Employer City of Highland Park      Occupation Mayor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 345000.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City      State      Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer      Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100000.00
<b>TOTAL</b> This Period (last page this line number only).....	100000.00

**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 100 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 238.28 <b>Transaction ID : VPE9HA06WQ8</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cellphone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : VPE9HA09NN2</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cellphone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 337.64 <b>Transaction ID : VPE9HA0BZF2</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	715.92
<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 101 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 238.23 <b>Transaction ID : VPE9HA0HD28</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 70.00 <b>Transaction ID : VPE9HA0KBG1</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 99.35 <b>Transaction ID : VPE9HA06WZ1</b>
City Glenview State IL Zip Code 60026-1057	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	407.58
<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 102 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 94 S Waukegan Rd		Amount of Each Disbursement this Period 72.44
City Deerfield	State IL	
Zip Code 60015-5216	Purpose of Disbursement Office Supplies	Transaction ID : VPE9HA0Y7X1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 72.44
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	Transaction ID : VPE9HA06XN5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 94 S Waukegan Rd		Amount of Each Disbursement this Period 72.44
City Deerfield	State IL	
Zip Code 60015-5216	Purpose of Disbursement Office Supplies	Transaction ID : VPE9HA0Y820
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	72.44
<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 103 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 77.60
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 69.00
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>c. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 80.93
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	158.53
<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 104 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 76.87
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Mileage Reimbursement	Transaction ID : VPE9HA0BZA2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 43.35
City Buffalo Grove	State IL	
Zip Code 60089-1599	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	Transaction ID : VPE9HA06WY3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 43.35
City Dallas	State TX	
Zip Code 75202-4295	Purpose of Disbursement Cell Phone Service	Transaction ID : VPE9HA0Y5N4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	43.35
<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 105 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 39.00
City Buffalo Grove State IL Zip Code 60089-1599	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	
Candidate Name	Category/Type	Transaction ID : VPE9HA06XR8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City of Highland Park</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1707 Saint Johns Ave		Amount of Each Disbursement this Period 39.00
City Highland Park State IL Zip Code 60035-3532	Purpose of Disbursement Parking	
Candidate Name	Category/Type	Transaction ID : VPE9HA0Y5X7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>C. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 43.57
City Buffalo Grove State IL Zip Code 60089-1599	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	
Candidate Name	Category/Type	Transaction ID : VPE9HA06XS6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.57
<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 106 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 53.00 <b>Transaction ID : VPE9HA0E762</b>
City Buffalo Grove State IL Zip Code 60089-1599	Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 43.35 <b>Transaction ID : VPE9HA0YAJ0</b>
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>c. Commonwealth Edison</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 3500 N California Ave		Amount of Each Disbursement this Period 390.87 <b>Transaction ID : VPE9HA06WR6</b>
City Chicago State IL Zip Code 60618-5849	Purpose of Disbursement Utilities	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	443.87
<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 107 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Commonwealth Edison</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 3500 N California Ave		Amount of Each Disbursement this Period 244.17 <b>Transaction ID : VPE9HA0HD36</b>
City Chicago	State IL Zip Code 60618-5849	
Purpose of Disbursement Utilities	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Consolidated Printing Company</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 5942 N Northwest Hwy		Amount of Each Disbursement this Period 787.61 <b>Transaction ID : VPE9HA04AE4</b>
City Chicago	State IL Zip Code 60631-2664	
Purpose of Disbursement Printing of Campaign Materials	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DePaul University Career Center</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address DePaul Center 1 East Jackson Suite 9500		Amount of Each Disbursement this Period 175.00 <b>Transaction ID : VPE9HA0MGG9</b>
City Chicago	State IL Zip Code 60604	
Purpose of Disbursement Internship Fair Booth	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1206.78
<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 108 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DePaul University Career Center</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 31 / 2015</b>
Mailing Address <b>DePaul Center 1 East Jackson Suite 9500</b>		Amount of Each Disbursement this Period <b>-175.00</b> <b>Transaction ID : VPE9HA14KP9</b>
City <b>Chicago</b> State <b>IL</b> Zip Code <b>60604</b>	Purpose of Disbursement <b>Voided Check</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>1 Hacker Way</b>		Amount of Each Disbursement this Period <b>399.77</b> <b>Transaction ID : VPE9HA04AD6</b>
City <b>Menlo Park</b> State <b>CA</b> Zip Code <b>94025-1456</b>	Purpose of Disbursement <b>Online Advertising</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. First Data Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address <b>5565 Glenridge Connector NE Ste 2000</b>		Amount of Each Disbursement this Period <b>2.25</b> <b>Transaction ID : VPE9HA06X25</b>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30342-1651</b>	Purpose of Disbursement <b>Credit Card Processing Fee</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>227.02</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 109 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. First Data Merchant Services</b>		M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA06X32	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. First Data Merchant Services</b>		M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA06X40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. First Data Merchant Services</b>		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA0BC37	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3154.00
<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 110 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. First Data Merchant Services</b>		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA0BC53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. First Data Merchant Services</b>		M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA0BC61	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. First Data Merchant Services</b>		M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period
City Atlanta	State GA	Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name	Transaction ID : VPE9HA0HW38	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	713.25
<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 111 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

**A. First Data Merchant Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 03 / 2015

Amount of Each Disbursement this Period  
2.24

Transaction ID : VPE9HA0HW54

Category/Type

**B. First Data Merchant Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 03 / 2015

Amount of Each Disbursement this Period  
622.63

Transaction ID : VPE9HA0HW62

Category/Type

**c. Patrice S Friedman**

Full Name (Last, First, Middle Initial)  
Mailing Address 17 E 83rd St

City New York State NY Zip Code 10028-0401

Purpose of Disbursement  
Event Catering & Space

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 06 / 2015

Amount of Each Disbursement this Period  
2653.07

Transaction ID : VPF8SG95KA41

\* In-Kind Received

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 3277.94

**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 112 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2015</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		Amount of Each Disbursement this Period <b>57.66</b>
City <b>Mountain View</b> State <b>CA</b> Zip Code <b>94043-1351</b>	Purpose of Disbursement <b>Email Service</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA06X58</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 04 / 2015</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		Amount of Each Disbursement this Period <b>62.08</b>
City <b>Mountain View</b> State <b>CA</b> Zip Code <b>94043-1351</b>	Purpose of Disbursement <b>Email Service</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA0BMQ2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 04 / 2015</b>
Mailing Address <b>1600 Amphitheatre Pkwy</b>		Amount of Each Disbursement this Period <b>70.83</b>
City <b>Mountain View</b> State <b>CA</b> Zip Code <b>94043-1351</b>	Purpose of Disbursement <b>Email Service</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA0J7H2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>190.57</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 113 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2015</b>
Mailing Address <b>2850 Patriot Blvd</b>		Amount of Each Disbursement this Period <b>69.56</b>
City <b>Glenview</b>	State <b>IL</b>	
Zip Code <b>60026-8041</b>	Purpose of Disbursement <b>Office Supplies</b>	<b>Transaction ID : VPE9HA06XJ1</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 23 / 2015</b>
Mailing Address <b>2850 Patriot Blvd</b>		Amount of Each Disbursement this Period <b>53.60</b>
City <b>Glenview</b>	State <b>IL</b>	
Zip Code <b>60026-8041</b>	Purpose of Disbursement <b>Office Supplies</b>	<b>Transaction ID : VPE9HA0G4G2</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Imperial Realty</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2015</b>
Mailing Address <b>4747 W Peterson Ave</b>		Amount of Each Disbursement this Period <b>600.00</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60646-5712</b>	Purpose of Disbursement <b>Office Rent</b>	<b>Transaction ID : VPE9HA04A53</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>723.16</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 114 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Imperial Realty</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 4747 W Peterson Ave		Amount of Each Disbursement this Period 84.00
City Chicago	State IL Zip Code 60646-5712	
Purpose of Disbursement Office Supplies	Category/Type	Transaction ID : VPE9HA0BZE4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Imperial Realty</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 4747 W Peterson Ave		Amount of Each Disbursement this Period 541.00
City Chicago	State IL Zip Code 60646-5712	
Purpose of Disbursement Office Rent	Category/Type	Transaction ID : VPE9HA0H0W6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Imperial Realty</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2015
Mailing Address 4747 W Peterson Ave		Amount of Each Disbursement this Period 600.00
City Chicago	State IL Zip Code 60646-5712	
Purpose of Disbursement Office Rent	Category/Type	Transaction ID : VPE9HA0HD03
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1225.00
<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 115 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : VPE9HA06WS3</b>
City Chicago	State IL Zip Code 60640-4837	
Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 833 Central Ave		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : VPE9HA0Y4N1</b>
City Highland Park	State IL Zip Code 60035-6268	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>c. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : VPE9HA06WT1</b>
City Chicago	State IL Zip Code 60640-4837	
Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	690.00
<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 116 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address Address Line 11515 E Woodfield Rd Ste 1400		Amount of Each Disbursement this Period 200.00
City Schaumburg	State IL	
Zip Code 60173	Purpose of Disbursement Cell Phone Service	Transaction ID : VPE9HA0Y508
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 498.40
City Chicago	State IL	
Zip Code 60640-4837	Purpose of Disbursement Mileage Reimbursement	Transaction ID : VPE9HA06WV9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period 117.78
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Travel	Transaction ID : VPF8SG2CKE71
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	616.18
<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 117 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2015</b>
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period <b>77.00</b>
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Parking	<b>Transaction ID : VPF8SG2CJT9I</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2015</b>
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period <b>205.61</b>
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Event Catering	<b>Transaction ID : VPF8SG2CJR3I</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 30 / 2015</b>
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period <b>46.35</b>
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Office Supplies	<b>Transaction ID : VPF8SGDFAQ5I</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>328.96</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 118 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period 78.81
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Food for Meeting	Transaction ID : VPF8SGB57M11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alyssa L Knobel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 650 Sumac Rd		Amount of Each Disbursement this Period 8.97
City Highland Park	State IL	
Zip Code 60035-4450	Purpose of Disbursement Office Supplies	Transaction ID : VPF8SGB57N9I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Maccabee Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 211 N 1st St # 425		Amount of Each Disbursement this Period 6000.00
City Minneapolis	State MN	
Zip Code 55401-1403	Purpose of Disbursement Consultant - Research	Transaction ID : VPE9HA08ET8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6087.78
<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 119 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Maccabee Group</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 211 N 1st St # 425			Amount of Each Disbursement this Period 1552.30
City Minneapolis	State MN	Zip Code 55401-1403	
Purpose of Disbursement Consultant - Research		Candidate Name	Transaction ID : VPE9HA08EV6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Maccabee Group</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 211 N 1st St # 425			Amount of Each Disbursement this Period 6000.00
City Minneapolis	State MN	Zip Code 55401-1403	
Purpose of Disbursement Consultant - Research		Candidate Name	Transaction ID : VPE9HA0E747
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Media House LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 2055 Green Bay Rd			Amount of Each Disbursement this Period 2500.00
City Highland Park	State IL	Zip Code 60035-6100	
Purpose of Disbursement Website Services		Candidate Name	Transaction ID : VPE9HA06WP0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10052.30
<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 120 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

**A. Next Level Partners**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 05 / 2015

Amount of Each Disbursement this Period  
1750.00

Transaction ID : VPE9HA06X09

Category/Type

**B. Next Level Partners**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 05 / 2015

Amount of Each Disbursement this Period  
1750.00

Transaction ID : VPE9HA06X17

Category/Type

**C. Next Level Partners**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 04 / 2015

Amount of Each Disbursement this Period  
1750.00

Transaction ID : VPE9HA0BZD6

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 5250.00

**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 121 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Next Level Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : VPE9HA0KB46</b>
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 850.00 <b>Transaction ID : VPE9HA06WN2</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 850.00 <b>Transaction ID : VPE9HA0DRZ0</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3450.00
<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 122 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 850.00 <b>Transaction ID : VPE9HA0J7G4</b>
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period 491.00 <b>Transaction ID : VPE9HA04A37</b>
City Waukegan State IL Zip Code 60085-7538	Purpose of Disbursement Printing of Campaign Materials	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period 165.53 <b>Transaction ID : VPE9HA06XC4</b>
City Waukegan State IL Zip Code 60085-7538	Purpose of Disbursement Printing of Campaign Materials	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1506.53
<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 123 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. North Shore Printers, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 535 S Sheridan Rd		Amount of Each Disbursement this Period 267.84
City Waukegan	State IL	
Zip Code 60085-7538	Purpose of Disbursement Printing of Campaign Materials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 94 S Waukegan Rd		Amount of Each Disbursement this Period 111.06
City Deerfield	State IL	
Zip Code 60015-5216	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 94 S Waukegan Rd		Amount of Each Disbursement this Period 207.91
City Deerfield	State IL	
Zip Code 60015-5216	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	586.81
<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 124 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 8145.54
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : VPE9HA04A79
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 868.66
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0EN88
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.22
City Buffalo Grove	State IL	
Zip Code 60089-1599	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0EN96
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8145.54
<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 125 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 2307.89
City Chicago	State IL	Zip Code 60640-4837
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0ENA4	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) <b>B. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 1028.59
City Chicago	State IL	Zip Code 60625-7083
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0ENB2	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) <b>c. Samantha A Szpunar</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 5685 Cobb Creek Rd		Amount of Each Disbursement this Period 1003.59
City Rochester	State MI	Zip Code 48306-2417
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0ENC0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 126 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. David Stephen Topping</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 471 Lakeside Pl		Amount of Each Disbursement this Period 1371.59
City Highland Park	State IL	
Zip Code 60035-5065	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0END8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 51.41
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Worker's Compensation	Transaction ID : VPE9HA04A87
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 3704.42
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll - Taxes	Transaction ID : VPE9HA04AA2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3755.83
<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 127 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 56.07
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll - Invoice	Transaction ID : VPE9HA04AB0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 7090.55
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : VPE9HA06Y35
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 819.59
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENJ7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7146.62
<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 128 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.21
City Buffalo Grove	State IL Zip Code 60089-1599	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0ENH9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 2466.89
City Chicago	State IL Zip Code 60640-4837	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0ENG2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 1028.58
City Chicago	State IL Zip Code 60625-7083	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0ENZ0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 129 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Samantha A Szpunar</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 5685 Cobb Creek Rd		Amount of Each Disbursement this Period 1003.58
City Rochester	State MI Zip Code 48306-2417	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0ENF4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. David Stephen Topping</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 471 Lakeside Pl		Amount of Each Disbursement this Period 206.70
City Highland Park	State IL Zip Code 60035-5065	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0ENE6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 3264.24
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll - Taxes	Category/Type	Transaction ID : VPE9HA06Y43
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3264.24
<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 130 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2015</b>
Mailing Address <b>911 Panorama Trl S</b>		Amount of Each Disbursement this Period <b>46.41</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14625-2311</b>	Purpose of Disbursement <b>Worker's Compensation</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA06Y51</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2015</b>
Mailing Address <b>911 Panorama Trl S</b>		Amount of Each Disbursement this Period <b>64.57</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14625-2311</b>	Purpose of Disbursement <b>Worker's Compensation</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA06Y69</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2015</b>
Mailing Address <b>911 Panorama Trl S</b>		Amount of Each Disbursement this Period <b>9405.57</b>
City <b>Rochester</b> State <b>NY</b> Zip Code <b>14625-2311</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA0A8Z2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9516.55</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 131 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 1003.59
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENK5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.22
City Buffalo Grove	State IL	
Zip Code 60089-1599	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENM3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. John D Keig</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 4607 N Malden St Apt 1		Amount of Each Disbursement this Period 3013.45
City Chicago	State IL	
Zip Code 60640-4837	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENN1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 132 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stacy Raker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 300 N State St Apt 3306		Amount of Each Disbursement this Period 1791.13
City Chicago	State IL Zip Code 60654-5450	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VPE9HA0EP06
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>B. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 1028.59
City Chicago	State IL Zip Code 60625-7083	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VPE9HA0ENY2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>c. Samantha A Szpunar</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 5685 Cobb Creek Rd		Amount of Each Disbursement this Period 1003.59
City Rochester	State MI Zip Code 48306-2417	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VPE9HA0ENP9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 133 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 4641.29		
City Rochester	State NY	Zip Code 14625-2311	Transaction ID : VPE9HA0BC03		
Purpose of Disbursement Payroll - Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 58.90		
City Rochester	State NY	Zip Code 14625-2311	Transaction ID : VPE9HA0BC11		
Purpose of Disbursement Worker's Compensation		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015		
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 56.07		
City Rochester	State NY	Zip Code 14625-2311	Transaction ID : VPE9HA0BC29		
Purpose of Disbursement Payroll - Invoice		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4756.26
<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 134 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 7719.83
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0E3M4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 1003.58
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENT1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		*

Full Name (Last, First, Middle Initial) <b>C. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.21
City Buffalo Grove	State IL	
Zip Code 60089-1599	Purpose of Disbursement Payroll	Transaction ID : VPE9HA0ENS3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7719.83
<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 135 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Carter Harms</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1375 Holland HI		Amount of Each Disbursement this Period 443.00
City Southlake State TX Zip Code 76092-4803	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : VPE9HA0ENV8  [MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Stacy Raker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 300 N State St Apt 3306		Amount of Each Disbursement this Period 2307.88
City Chicago State IL Zip Code 60654-5450	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : VPE9HA0ENW6  [MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 1028.58
City Chicago State IL Zip Code 60625-7083	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : VPE9HA0ENX4  [MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 136 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Samantha A Szpunar</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 5685 Cobb Creek Rd			Amount of Each Disbursement this Period 1371.58
City Rochester	State MI	Zip Code 48306-2417	
Purpose of Disbursement Payroll		Candidate Name	Transaction ID : VPE9HA0ENR5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	[MEMO ITEM] *
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 3617.83
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll - Taxes		Candidate Name	Transaction ID : VPE9HA0EN55
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 56.07
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll - Invoice		Candidate Name	Transaction ID : VPE9HA0EN63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3673.90
<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 137 OF 168	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 49.29
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Worker's Compensation		Transaction ID : VPE9HA0EN70
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 7611.95
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll		Transaction ID : VPE9HA0GT44
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 1003.59
City Glenview	State IL Zip Code 60026-1057	
Purpose of Disbursement Payroll		Transaction ID : VPE9HA0Y9J9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7661.24
<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 138 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.22
City Buffalo Grove	State IL	Zip Code 60089-1599
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0Y9F6	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carter Harms</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1375 Holland HI		Amount of Each Disbursement this Period 649.07
City Southlake	State TX	Zip Code 76092-4803
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0Y9P1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stacy Raker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 300 N State St Apt 3306		Amount of Each Disbursement this Period 2307.89
City Chicago	State IL	Zip Code 60654-5450
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : VPE9HA0Y9T3	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 139 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 714.59
City Chicago	State IL Zip Code 60625-7083	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0J2F6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Samantha A Szpunar</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 5685 Cobb Creek Rd		Amount of Each Disbursement this Period 1371.59
City Rochester	State MI Zip Code 48306-2417	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0J2G4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 3473.68
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll - Taxes	Category/Type	Transaction ID : VPE9HA0H0S3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3473.68
<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 140 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 56.07
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll - Invoice		Transaction ID : VPE9HA0H0R5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 48.65
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Worker's Compensation		Transaction ID : VPE9HA0H0T1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 6897.33
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll		Transaction ID : VPE9HA0N7F9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7002.05
<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 141 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Daniel Berkowitz</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 4100 Chester Dr		Amount of Each Disbursement this Period 1003.58
City Glenview	State IL	
Zip Code 60026-1057	Purpose of Disbursement Payroll	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Andrew Bookman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1226 S Wellington Ct		Amount of Each Disbursement this Period 1565.21
City Buffalo Grove	State IL	
Zip Code 60089-1599	Purpose of Disbursement Payroll	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Carter Harms</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1375 Holland HI		Amount of Each Disbursement this Period 649.08
City Southlake	State TX	
Zip Code 76092-4803	Purpose of Disbursement Payroll	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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 142 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stacy Raker</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 300 N State St Apt 3306		Amount of Each Disbursement this Period 3207.88
City Chicago	State IL Zip Code 60654-5450	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0Y9R7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Samantha A Szpunar</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 5685 Cobb Creek Rd		Amount of Each Disbursement this Period 1371.58
City Rochester	State MI Zip Code 48306-2417	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : VPE9HA0Y9X6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 3268.81
City Rochester	State NY Zip Code 14625-2311	
Purpose of Disbursement Payroll - Taxes	Category/Type	Transaction ID : VPE9HA0N7G7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3268.81
<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 143 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 45.53
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Worker's Compensation	Transaction ID : VPE9HA0N7H4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 53.69
City Rochester	State NY	
Zip Code 14625-2311	Purpose of Disbursement Payroll - Invoice	Transaction ID : VPE9HA0N7J2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Matt S Pestine</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 340 Moraine Rd.		Amount of Each Disbursement this Period 67.38
City Highland Park	State IL	
Zip Code 60035	Purpose of Disbursement Event Supplies	Transaction ID : VPF8SGB57Z8I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	166.60
<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 144 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stacy Raker</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 300 N State St Apt 3306		Amount of Each Disbursement this Period 371.25 <b>Transaction ID : VPE9HA0BZG0</b>
City Chicago	State IL Zip Code 60654-5450	
Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City of Highland Park</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1707 Saint Johns Ave		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : VPE9HA0Y923</b>
City Highland Park	State IL Zip Code 60035-3532	
Purpose of Disbursement Parking		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial) <b>C. Rosebud Prime</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1 S Dearborn St		Amount of Each Disbursement this Period 321.25 <b>Transaction ID : VPE9HA0Y965</b>
City Chicago	State IL Zip Code 60603-2302	
Purpose of Disbursement Event Catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**  
\*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	371.25
<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 145 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Joseph Randol</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1628 W Fargo Ave 1M		Amount of Each Disbursement this Period 326.66 <b>Transaction ID : VPE9HA0J146</b>
City Chicago	State IL Zip Code 60626-1706	
Purpose of Disbursement Consultant - Field	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 2454 W Foster Ave		Amount of Each Disbursement this Period 59.21 <b>Transaction ID : VPE9HA06WW7</b>
City Chicago	State IL Zip Code 60625-7083	
Purpose of Disbursement Reimbursement (vendors that aggregate over \$200 listed below)	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2015
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 59.21 <b>Transaction ID : VPE9HA0Y581</b>
City Dallas	State TX Zip Code 75202-4295	
Purpose of Disbursement Cell Phone Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	385.87
<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 146 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Catherine A Rolfe</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2015</b>
Mailing Address <b>2454 W Foster Ave</b>		Amount of Each Disbursement this Period <b>32.00</b> Transaction ID : <b>VPE9HA06WX5</b>
City <b>Chicago</b> State <b>IL</b> Zip Code <b>60625-7083</b>	Purpose of Disbursement <b>Reimbursement (vendors that aggregate over \$200 listed below)</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City of Highland Park</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2015</b>
Mailing Address <b>1707 Saint Johns Ave</b>		Amount of Each Disbursement this Period <b>32.00</b> Transaction ID : <b>VPE9HA0Y5G4</b> <b>[MEMO ITEM]</b> *
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-3532</b>	Purpose of Disbursement <b>Parking</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nancy Rotering</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 23 / 2015</b>
Mailing Address <b>46 Lakeview Ter</b>		Amount of Each Disbursement this Period <b>265.75</b> Transaction ID : <b>VPF8SG7FVR5I</b>  * In-Kind Received
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-5042</b>	Purpose of Disbursement <b>Food for Event</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>297.75</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 147 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Nancy Rotering</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 46 Lakeview Ter		Amount of Each Disbursement this Period 111.32
City Highland Park	State IL	
Zip Code 60035-5042	Purpose of Disbursement Event Supplies	Transaction ID : VPF8SGB57T9I
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nancy Rotering</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 46 Lakeview Ter		Amount of Each Disbursement this Period 552.40
City Highland Park	State IL	
Zip Code 60035-5042	Purpose of Disbursement Travel	Transaction ID : VPF8SGF0CM2I
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 201.85
City Highland Park	State IL	
Zip Code 60035-2361	Purpose of Disbursement Office Supplies	Transaction ID : VPE9HA06XE9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	865.57
<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 148 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 08 / 2015</b>
Mailing Address <b>1931 Skokie Valley Rd</b>		Amount of Each Disbursement this Period <b>183.57</b>
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-2361</b>	Purpose of Disbursement <b>Office Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA06XF7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2015</b>
Mailing Address <b>1931 Skokie Valley Rd</b>		Amount of Each Disbursement this Period <b>212.48</b>
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-2361</b>	Purpose of Disbursement <b>Office Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA06XG5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2015</b>
Mailing Address <b>1931 Skokie Valley Rd</b>		Amount of Each Disbursement this Period <b>193.20</b>
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-2361</b>	Purpose of Disbursement <b>Office Supplies</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA07N82</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>589.25</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 149 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 320.77
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0BMN6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 9.71
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0BMP4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 55.74
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0C014
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	386.22
<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 150 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 37.75
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0DS08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 8.64
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0G4D8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 206.52
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0G4E6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	252.91
<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 151 OF 168			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 304.77
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0H0Q7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1931 Skokie Valley Rd		Amount of Each Disbursement this Period 28.07
City Highland Park	State IL Zip Code 60035-2361	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VPE9HA0HW05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 730 N Franklin St Ste 404		Amount of Each Disbursement this Period 5400.00
City Chicago	State IL Zip Code 60654-7205	
Purpose of Disbursement Direct Mail Services	Candidate Name	Transaction ID : VPE9HA0F907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5732.84
<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 152 OF 168			
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. David Stephen Topping</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 471 Lakeside Pl		Amount of Each Disbursement this Period -54.37 <b>Transaction ID : VPE9HA14M73</b>
City Highland Park	State IL	
Purpose of Disbursement Voided Check		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 833 Central Ave		Amount of Each Disbursement this Period 196.00 <b>Transaction ID : VPE9HA06Y19</b>
City Highland Park	State IL	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 833 Central Ave		Amount of Each Disbursement this Period 147.00 <b>Transaction ID : VPE9HA0A8V1</b>
City Highland Park	State IL	
Purpose of Disbursement Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	288.63
<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 153 OF 168	
	<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)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 23 / 2015</b>
Mailing Address <b>833 Central Ave</b>		Amount of Each Disbursement this Period <b>588.00</b>
City <b>Highland Park</b> State <b>IL</b> Zip Code <b>60035-6268</b>	Purpose of Disbursement <b>Postage</b>	
Candidate Name	Category/Type	<b>Transaction ID : VPE9HA0G4K6</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		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	Category/Type	
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		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	Category/Type	
Candidate Name		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>588.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>120519.98</b>

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Bernice Weissbourd</b>		Date of Disbursement MM / DD / YYYY 11 / 04 / 2015
Mailing Address 2737 Sheridan Rd		Amount of Each Disbursement this Period 750.00
City Evanston	State IL	
Zip Code 60201-1727	Purpose of Disbursement Contribution Refund	Transaction ID : VPE9HA0BZH8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	750.00

**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 155 OF 168			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nancy Rotering for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Hillary for America</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2015</b>
Mailing Address <b>PO Box 5256</b>		Amount of Each Disbursement this Period <b>50.00</b> <b>Transaction ID : VPE9HA0E3K6</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10185-5256</b>	Purpose of Disbursement Contribution	
Candidate Name <b>Hillary Rodham Clinton</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>50.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SB6VVM0L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Nancy Rotering

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

**TERMS**

Date Incurred: M 01 / D 15 / Y 2015  
 Date Due: M 12 / D 31 / Y 2018  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	25000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SCN9PQ9L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Nancy Rotering

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
15000.00 0.00 15000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 31 / Y 2015 M 12 / D 31 / Y 2018 none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 15000.00  
**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.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SCNA838L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Nancy Rotering

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
50000.00 0.00 50000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
03 / 31 / 2015 03 / 31 / 2016 4.38 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional).....   
**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Nancy Rotering for Congress, Inc.** Transaction ID : **VPF8SDNX7Y9L**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Nancy Rotering</b>	<b>[PERSONAL FUNDS]</b>	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 46 Lakeview Ter		

City	State	ZIP Code
Highland Park	IL	60035-5042

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 27 / Y 2015	M 12 / D 31 / Y 2018	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	40000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width:100%" type="text"/>

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SEAKJF9L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Nancy Rotering

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
20000.00 0.00 20000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 06 / D 30 / Y 2015 M 12 / D 31 / Y 2018 none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 20000.00  
**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.



# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Nancy Rotering for Congress, Inc.** Transaction ID : VPF8SEAKJG7L

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Nancy Rotering**

Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 06 / D 30 / Y 2015  
 Date Due: M 01 / D 01 / Y 2016  
 Interest Rate: 7.75 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 50000.00

**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.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SFYK90L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Nancy Rotering

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
25000.00 0.00 25000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 09 / D 30 / Y 2015 M 12 / D 31 / Y 2016 none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SFYYKF8L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Nancy Rotering

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 30 / 2015 12 / 31 / 2016 4.25 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SFYYKH3L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Nancy Rotering

Election: 2016

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 30 / 2015 12 / 31 / 2016 4.25 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Nancy Rotering for Congress, Inc.** Transaction ID : **VPF8SFYKJ1L**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Nancy Rotering</b>	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 46 Lakeview Ter	

City	State	ZIP Code
Highland Park	IL	60035-5042

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 30 / 2015	12 / 31 / 2016	4.25 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : VPF8SGC49K1L  
**Nancy Rotering for Congress, Inc.**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Nancy Rotering</b>	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 46 Lakeview Ter	

City	State	ZIP Code
Highland Park	IL	60035-5042

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 28 / Y 2015	M 12 / D 31 / Y 2016	4.25 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input style="width: 100%;" type="text" value="75000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VPF8SGC49M9L

Nancy Rotering for Congress, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Nancy Rotering

Primary  
 General  
 Other (specify) ▼

Mailing Address  
46 Lakeview Ter

City State ZIP Code  
Highland Park IL 60035-5042

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
25000.00 0.00 25000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 28 / Y 2015 M 12 / D 31 / Y 2020 none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 25000.00  
**TOTALS** This Period (last page in this line only)..... ▶ 345000.00

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

# SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page \_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <b>Nancy Rotering for Congress, Inc.</b>	Transaction ID : VPF8SGC49K1B	FEC IDENTIFICATION NUMBER <b>C</b> C00574434
---	-------------------------------	---

LENDING INSTITUTION (LENDER) Full Name <b>US Bank - HELOC</b>	Amount of Loan <b>75000.00</b>	Interest Rate (APR) <b>4.25</b> %
---	-----------------------------------	--------------------------------------

Mailing Address 310 Waukegan Ave	Date Incurred or Established <b>12 / 28 / 2015</b>	Date Due <b>12 / 31 / 2016</b>
City State Zip Code Highwood IL 60040	Back Ref <b>VPF8SGC49K1L</b>	

A. Has loan been restructured?  No  Yes If yes, date originally incurred **\_\_\_\_ / \_\_\_\_ / \_\_\_\_**

B. If line of credit,  
Amount of this Draw: **75000.00** Total Outstanding Balance: **95000.00**

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral? **0.00**

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_

What is the estimated value? **0.00**

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: \_\_\_\_\_

Date account established: **\_\_\_\_ / \_\_\_\_ / \_\_\_\_** Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  
N/A 104.3(d)(4) and 100.83

G. COMMITTEE TREASURER Typed Name <b>N/A N/A</b> Signature _____	DATE <b>01 / 01 / 2000</b>
--	-------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name <b>N/A N/A</b> Signature <b>N/A N/A</b>	[Electronically Filed]	DATE <b>01 / 01 / 2000</b>
Title <b>N/A</b>		