

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 Jacobs for Congress

ADDRESS (number and street) ▼

139 N Main St., 201

Check if different than previously reported. (ACC)

Bel Air

MD

21014

2. **FEC IDENTIFICATION NUMBER** ▼

C C00509216

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MD

02

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 04 / 03 / 2012 in the State of MD

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

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

Election on 04 / 03 / 2012 in the State of MD

5. Covering Period

11 / 29 / 2011 through 03 / 14 / 2012

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

Type or Print Name of Treasurer Lesley Lookingbill

Signature of Treasurer

Lesley Lookingbill

[Electronically Filed]

Date

05 / 19 / 2012

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Nancy Jacobs for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	58865.00	58865.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58865.00	58865.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20525.56	20525.56
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20525.56	20525.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	35683.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Nancy Jacobs for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	49925.00	49925.00
(ii) Unitemized.....	5951.00	5951.00
(iii) TOTAL of contributions from individuals ▶	55876.00	55876.00
(b) Political Party Committees.....	2989.00	2989.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	58865.00	58865.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	67.00	67.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	58932.00	58932.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20525.56	20525.56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	2722.69	2722.69
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	23248.25	23248.25

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58932.00
25. SUBTOTAL (add Line 23 and Line 24).....	58932.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23248.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	35683.75

**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 25
(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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Virginia Beaty

Mailing Address 529 Trimble Rd

City Joppa State MD Zip Code 21085

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.4379

Amount of Each Receipt this Period
 250.00

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

Mailing Address 529 Trimble Rd

City Joppa State MD Zip Code 21085

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Clark D Connellee

Mailing Address 3205 Cool Branch Rd

City Churchville State MD Zip Code 21028

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

Name of Employer Pepsi Bottling Group Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
 2500.00

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: (check only one)	PAGE 6 OF 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Jerrilea Connellee

Mailing Address 3205 Cool Branch Rd

City Churchville State MD Zip Code 21028

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

Name of Employer PepsiCo of Havre de Grace Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1901 Van Bibber Rd

City Edgewood State MD Zip Code 21040

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

Name of Employer Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period
300.00

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

Mailing Address 10631 Pot Spring Rd

City Cockeysville State MD Zip Code 21030

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

Name of Employer self-employed Occupation Real estate developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.4359

Amount of Each Receipt this Period
2500.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
William Lee Lee Gaines Jr.

Mailing Address 6 Bowen Mill Rd

City Baltimore State MD Zip Code 21212

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

Name of Employer self-employed Occupation Utility Contractor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2012

Transaction ID : SA11AI.4393

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Gary Gilbert II

Mailing Address 1475 Wynodham Dr South

City York State PA Zip Code 17403

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

Name of Employer self-employed Occupation Real Estate Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1475 Wynodham Dr South

City York State PA Zip Code 17403

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

Name of Employer Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SA11AI.4241

Amount of Each Receipt this Period
2500.00

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

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

7500.00

**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 25
	<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 Jacobs for Congress

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

Mailing Address 304 Vale Rd

City State Zip Code
Bel Air MD 21014

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

Name of Employer self-employed Occupation Restaurant owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2012

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 268

City State Zip Code
Jarrettsville MD 21084

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period
 2500.00

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

Mailing Address PO Box 268

City State Zip Code
Jarrettsville MD 21084

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Mary Jo Henderson

Mailing Address 2621 Bailey Dr

City Forest Hill State MD Zip Code 21050

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

Name of Employer Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2012

Transaction ID : SA11AI.4286

Amount of Each Receipt this Period
 2500.00

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

Mailing Address PO Box 268

City Jarrettsville State MD Zip Code 21084

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

Name of Employer Occupation CEO

Nutramax

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4341

Amount of Each Receipt this Period
 2500.00

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

Mailing Address PO Box 268

City Jarrettsville State MD Zip Code 21084

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

Name of Employer Occupation CEO

Nutramax

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2012

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period
 5000.00

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

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

7500.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Troy Henderson

Mailing Address 2621 Bailey Rd

City Forest Hill State MD Zip Code 21050

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

Name of Employer Nutramax Laboratories Occupation Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2012

Transaction ID : SA11AI.4375

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1997 Annapolis Exchange Pkwy Ste 300

City Annapolis State MD Zip Code 21401

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2012

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period
700.00

C. Full Name (Last, First, Middle Initial)
Howard S Klein

Mailing Address 13608 Jarrettsville Pike

City Phoenix State MD Zip Code 21131

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

Name of Employer self-employed Occupation Grocery store chain owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 11 OF 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nancy Jacobs for Congress

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

Mailing Address 8951 Edmonston Rd

City State Zip Code
Greenbelt MD 20770

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

Name of Employer self-employed Occupation Insurance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 19 / 2012

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period
250.00

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

Mailing Address 752 Winterfield Ct

City State Zip Code
Bel Air MD 21015

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

Name of Employer self-employed Occupation Restaurant owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2011

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period
1500.00

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

Mailing Address 752 Winterfield Ct

City State Zip Code
Bel Air MD 21015

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

Name of Employer Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2011

Transaction ID : SA11AI.4377

Amount of Each Receipt this Period
1500.00

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

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

3250.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Robb Merritt

Mailing Address 6408 Pratt Ave

City Baltimore State MD Zip Code 21212

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

Name of Employer self-employed Occupation Real estate developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2012

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Barton S Mitchell

Mailing Address PO Box 1247

City Brooklandville State MD Zip Code 21022

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 8028 Ritchie Hwy Suite 300

City Pasadena State MD Zip Code 21122

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

Name of Employer self-employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period
 1000.00

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

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

6000.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Jayne Plank

Mailing Address 100005 Frederick Ave

City Kensington State MD Zip Code 20895

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

Name of Employer Occupation homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2200 Defense Hwy
407

City Crofton State MD Zip Code 21114

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

Name of Employer Occupation self-employed Insurance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Henry A Rosenberg

Mailing Address One North Charles St, 22nd Fl

City Baltimore State MD Zip Code 21201

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

Name of Employer Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.4200

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 14 OF 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Sandra Spedden

Mailing Address 1002 S. Schumaker Dr

City Salisbury State MD Zip Code 21804

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2012

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period
 300.00

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

Mailing Address 207 Hood Ct

City Churchville State MD Zip Code 21028

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period
 300.00

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

Mailing Address 2700 Philadelphia Rd

City Edgewood State MD Zip Code 21040

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

Name of Employer self-employed Occupation Home builder

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11AI.4344

Amount of Each Receipt this Period
 2500.00

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 15 OF 25
	<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 Jacobs for Congress

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

Mailing Address 3820 Manor Glen Rd

City State Zip Code
Baldwin MD 21013

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

Name of Employer Occupation
reired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period
750.00

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

Mailing Address 3820 Manor Glen Rd

City State Zip Code
Baldwin MD 21013

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

Name of Employer Occupation
reired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2012

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
David Williams Jr.

Mailing Address 3098 Augustine Herman Hwy

City State Zip Code
Chesapeake City MD 21915

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

Name of Employer Occupation
self-employed Auto dealership owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2012

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
250.00

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

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

1075.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Gerard Wittstadt Jr.

Mailing Address 511 Ricketts Mill Rd

City State Zip Code
Elkton MD 21921

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

Name of Employer self-employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2 Old Maple Ct

City State Zip Code
Essex MD 21221

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2012

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period
 500.00

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

Mailing Address 12920 Marsh Landing

City State Zip Code
Palm Beach FL 33418

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.4125

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

49925.00

**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 25
	<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 Jacobs for Congress

A. Full Name (Last, First, Middle Initial)
Andy Harris for Congress

Mailing Address **PO Box 1627**

City **Annapolis** State **MD** Zip Code **21404**

FEC ID number of contributing federal political committee. **C C00435974**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 11 / 2012

Transaction ID : SA11B.4406

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Friends of Barry Glassman

Mailing Address **PO Box 273**

City **Churchville** State **MD** Zip Code **21028**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 12 / 2012

Transaction ID : SA11B.4408

Amount of Each Receipt this Period
 999.00

C. Full Name (Last, First, Middle Initial)
Friends of Kathy Szeliga

Mailing Address **PO Box 40**

City **Kingsville** State **MD** Zip Code **21087**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2012

Transaction ID : SA11B.4410

Amount of Each Receipt this Period
 990.00

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

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

2989.00

2989.00

**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 18 OF 25			
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Britestar Business Solutions		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 1924.27
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 003	Transaction ID : SB17.4424
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Britestar Business Solutions		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 852.03
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 004	Transaction ID : SB17.4442
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Britestar Business Solutions		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 1305 B Governor Ct		Amount of Each Disbursement this Period 253.10
City Abingdon	State MD Zip Code 21009	
Purpose of Disbursement	Category/Type 006	Transaction ID : SB17.4452
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3029.40
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 19 OF 25			
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Enktesis LLC		Date of Disbursement MM / DD / YYYY 02 / 01 / 2012
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB17.4419
City Forest Hill	State MD	
Purpose of Disbursement Campaign Management		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Enktesis LLC		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 1448.72 Transaction ID : SB17.4423
City Forest Hill	State MD	
Purpose of Disbursement Campaign mgmt & office supplies		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lisa Fitzhugh		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4435
City Monkton	State MD	
Purpose of Disbursement Campaign manager		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5848.72
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 20 OF 25			
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Lisa Fitzhugh		Date of Disbursement MM / DD / YYYY 02 / 28 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 4,996.36 Transaction ID : SB17.4444
City Monkton	State MD	
Zip Code 21111	Purpose of Disbursement reimbursement - cell phone for campaign	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lisa Fitzhugh		Date of Disbursement MM / DD / YYYY 03 / 01 / 2012
Mailing Address 3818 Houcks Rd		Amount of Each Disbursement this Period 3,000.00 Transaction ID : SB17.4445
City Monkton	State MD	
Zip Code 21111	Purpose of Disbursement Campaign manager	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Indy's Services		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address PO Box 26		Amount of Each Disbursement this Period 1,887.50 Transaction ID : SB17.4437
City Perry Hall	State MD	
Zip Code 21128	Purpose of Disbursement Social Media Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4996.36
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 21 OF 25		
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Maryland Republican Party		Date of Disbursement MM / DD / YYYY 02 / 16 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4427
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement Deposit on campaign software per contract	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maryland Republican Party		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4441
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement Software payment on contract	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Maryland Republican Party		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4443
City Annapolis	State MD	
Zip Code 21401	Purpose of Disbursement monthly rent for software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1900.00
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 22 OF 25	
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Maryland Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 95 Cathedral St		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4451
City Annapolis State MD Zip Code 21401	Purpose of Disbursement monthly lease for software Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4439
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Merritt Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 2066 Lord Baltimore Dr		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4429
City Baltimore State MD Zip Code 21244	Purpose of Disbursement office rental Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 2000.00
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joe Sliwka		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 2320 Aquilas Delight		Amount of Each Disbursement this Period 2000.00
City Fallston State MD Zip Code 21047	Purpose of Disbursement Volunteer director Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period 2000.00
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
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 23 OF 25			
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Joe Sliwka		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 2320 Aquilas Delight		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4446
City Fallston State MD Zip Code 21047	Purpose of Disbursement Volunteer director Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Weyrich Cronin & Sorra		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 139 N Main St Ste 201		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4421
City Bel Air State MD Zip Code 21014	Purpose of Disbursement Treasurer/Accounting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	19674.48

**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 24 OF 25	
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial) A. Enktesis LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 1603 Belvue Dr		Amount of Each Disbursement this Period 975.47 Transaction ID : SB21.4475
City State Zip Code Forest Hill MD 21050	Purpose of Disbursement planning announcement & other campaign mgmt 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. paypal		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address PO Box 45950		Amount of Each Disbursement this Period 34.19 Transaction ID : SB21.4472
City State Zip Code Omaha NE 68145	Purpose of Disbursement paypal fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Suzanne Stoltenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 10522 High Rock Rd		Amount of Each Disbursement this Period 231.25 Transaction ID : SB21.4473
City State Zip Code Airville PA 17302	Purpose of Disbursement reimbursements for testing the waters research 005 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1240.91
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 25 OF 25	
	<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 Jacobs for Congress

Full Name (Last, First, Middle Initial)
A. Videography by Brent Myers

Mailing Address 8220 Maple Cliffe Way

City Ellicott City State MD Zip Code 21043

Purpose of Disbursement videotaping Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement / /

Amount of Each Disbursement this Period

Transaction ID : SB21.4478

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

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement / /

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement / /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)