

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Roraback 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))....	134307.00	371994.08
(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)).....	134307.00	371994.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	85778.76	103517.52
(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)).....	85778.76	103517.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	260976.56	
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).....	7000.00	

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

Roraback 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).....	108170.00	332955.28
(ii) Unitemized.....	26137.00	39038.80
(iii) TOTAL of contributions from individuals ▶	134307.00	371994.08
(b) Political Party Committees.....	0.00	0.00
(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))..	134307.00	371994.08
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.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	134307.00	371994.08

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	85778.76	103517.52
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	7500.00	7500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	93278.76	111017.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	219948.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	134307.00
25. SUBTOTAL (add Line 23 and Line 24).....	354255.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	93278.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	260976.56

**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 5 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. HOWARD L. ALLER

Mailing Address **LION'S HEAD**
87 CANAAN RD, UNIT 5F

City **SALISBURY** State **CT** Zip Code **06068-1628**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.563

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES BEACH BARLOW

Mailing Address **34 MAIN STREET**

City **NEW MILFORD** State **CT** Zip Code **06776-2830**

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

Name of Employer **C.M. BEACH COMPANY** Occupation **INVESTMENT DIRECTOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 29 / 2012

Transaction ID : SA11.584

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SUSAN P. BELCHER

Mailing Address **1 TOWN HILL ROAD**

City **LAKEVILLE** State **CT** Zip Code **06039-2311**

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

Name of Employer **HOUSEWIFE** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.560

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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 6 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. PATRICK J. BOLAND

Mailing Address 10 OSBORN ROAD
P.O. BOX 1336

City LITCHFIELD State CT Zip Code 06759-2317

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

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

Transaction ID : SA11.619

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PATRICK J. BOLAND

Mailing Address 10 OSBORN ROAD
P.O. BOX 1336

City LITCHFIELD State CT Zip Code 06759-2317

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

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

Transaction ID : SA11.642

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWIN G. BOOTH JR.

Mailing Address 2 COVENTRY LANE

City HARWINTON State CT Zip Code 06791-2413

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

Name of Employer TORRINGTON CASTING CO. Occupation FOUNDRY MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11.788

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

800.00

**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 105
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) MR. ALLAN BORGHESI		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 15 / 2012	
Mailing Address 134 WINDTREE DR P.O. BOX 689		Transaction ID : SA11.516	
City TORRINGTON	State CT	Zip Code 06790-7903	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer BORGHESI BLDG & ENG. CO INC		Occupation ENGINEER	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) MRS. MICHELE BOUCHARD		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2012	
Mailing Address 71 SOUTH STREET P.O. BOX 1855		Transaction ID : SA11.864	
City LITCHFIELD	State CT	Zip Code 06759-4005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED		Occupation N/A	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) MR. BYRON BROOKS		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2012	
Mailing Address 42 E. CHESTNUT HILL ROAD		Transaction ID : SA11.617	
City LITCHFIELD	State CT	Zip Code 06759-4121	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED		Occupation N/A	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. MARANA BROOKS

Mailing Address **88 WIGWAM ROAD**
P.O. BOX 1045

City **LITCHFIELD** State **CT** Zip Code **06759-3826**

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

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.865

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID L. BUCKLEY

Mailing Address **2815 N. 11TH STREET**

City **ARLINGTON** State **VA** Zip Code **22201-2888**

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

Name of Employer **HOST HOTELS & RESORTS** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 22 / 2012

Transaction ID : SA11.543

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. BONNIE E. BURR

Mailing Address **27 DINGLE BROOK ROAD**

City **HAWLEYVILLE** State **CT** Zip Code **06440**

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

Name of Employer **UCONN** Occupation **ASSISTANT DIRECTOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11.573

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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 9 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. BONNIE E. BURR

Mailing Address **27 DINGLE BROOK ROAD**

City **HAWLEYVILLE** State **CT** Zip Code **06440**

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

Name of Employer **UCONN** Occupation **ASSISTANT DIRECTOR**

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 / 26 / 2012

Transaction ID : SA11.814

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

Mailing Address **25 HOLLOW BROOK LANE**

City **CANAAN** State **CT** Zip Code **06018-2305**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

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

Transaction ID : SA11.497

Amount of Each Receipt this Period
400.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CARLOS M. CANAL JR.

Mailing Address **142 SABBADAY LANE**
P.O. BOX 63

City **WASHINGTON DEPOT** State **CT** Zip Code **06794-1220**

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

Name of Employer **N/A** Occupation **RETIRED**

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
02 / 15 / 2012

Transaction ID : SA11.521

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 10 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM CAPAUO

Mailing Address 65 PLYMOUTH RD

City HARWINTON State CT Zip Code 06791-2418

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

Name of Employer TEC CONTROL SYSTEMS, INC Occupation SELF EMPLOYED

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 / 13 / 2012

Transaction ID : SA11.706

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD O. CAREY

Mailing Address 138 Church Hill

City WASHINGTON DEPOT State CT Zip Code 06794

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.897

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RICHARD O. CAREY

Mailing Address 138 Church Hill

City WASHINGTON DEPOT State CT Zip Code 06794

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11.917

Amount of Each Receipt this Period
70.00

CONTRIBUTION

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

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

520.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MRS. ALICE CAROLAN

Mailing Address 205 WHISCONIER RD P.O. BOX 5188

City State Zip Code
BROOKFIELD CT 06804-5188

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11.731

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DINO CASALI

Mailing Address P.O. BOX 387
128 SHELDON LANE

City State Zip Code
THOMASTON CT 06787-0387

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

Name of Employer Occupation
OPPENHEIMER & CO. FINANCIAL ADVISOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2012

Transaction ID : SA11.522

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DINO CASALI

Mailing Address P.O. BOX 387
128 SHELDON LANE

City State Zip Code
THOMASTON CT 06787-0387

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

Name of Employer Occupation
OPPENHEIMER & CO. FINANCIAL ADVISOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11.690

Amount of Each Receipt this Period
150.00

CONTRIBUTION

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 12 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. J. BARCLAY COLLINS II

Mailing Address **KING HOUSE 12 NORTH MAIN STREET**

City **SHARON** State **CT** Zip Code **06069-2074**

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 **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11.728

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN W. COOLEY

Mailing Address **7 CROW'S NEST ROAD**

City **BRONXVILLE** State **NY** Zip Code **10708-4801**

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

Name of Employer **FX ALLIANCE INC** Occupation **CFO**

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
03 / 01 / 2012

Transaction ID : SA11.579

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ANNE COOLIDGE TAYLOR

Mailing Address **3520 RANCHERO ROAD**

City **PLANO** State **TX** Zip Code **75093-7606**

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

Name of Employer **W.P. CAREY & CO. LLC** Occupation **REAL ESTATE EXECUTIVE**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11.691

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1000.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. KENNETH F. COOPER

Mailing Address 14 EAST 90TH ST

City State Zip Code
NEW YORK NY 10128-0671

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

Name of Employer Occupation
ACK ASSET MANAGEMENT LLC INVESTMENT MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2012

Transaction ID : SA11.515

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN G. COUMANTAROS

Mailing Address 712 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10019-4108

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

Name of Employer Occupation
SOUTHERN STAR SHIPPING CO., INC. CORPORATE EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2012

Transaction ID : SA11.634

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS CRANE

Mailing Address 100 RESERVOIR RD

City State Zip Code
DALTON MA 01226-1056

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

Name of Employer Occupation
CRANE & CO. MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 07 / 2012

Transaction ID : SA11.504

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
EDWIN M. DAHILL

Mailing Address 15 LEDYARD RD

City WEST HARTFORD State CT Zip Code 06117-1712

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2012

Transaction ID : SA11.924

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JEANNE J. DANAHER

Mailing Address P.O. BOX 1857

City LITCHFIELD State CT Zip Code 06759-1857

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.630

Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. HELEN MACDONALD DEGENER

Mailing Address 130 SHARON MOUNTAIN RD
P.O. BOX 651

City SHARON State CT Zip Code 06069-2403

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

Name of Employer MAZAMA CAPITAL MGMT Occupation ADVISOR, DIRECTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2012

Transaction ID : SA11.529

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

335.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. CHARLES J. DELANEY

Mailing Address **34 LEEUWARDEN ROAD**

City **DARIEN** State **CT** Zip Code **06820-3025**

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

Name of Employer **SELF** Occupation **INFORMATION REQUESTED PER BEST EFF**

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 / 24 / 2012

Transaction ID : SA11.544

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARTHUR HILL DIEDRICK

Mailing Address **P.O. BOX 37**
P.O. BOX 37

City **LITCHFIELD** State **CT** Zip Code **06759-0037**

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

Name of Employer **SELF** Occupation **COMMUNICATIONS**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.861

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARTHUR HILL DIEDRICK

Mailing Address **P.O. BOX 37**
P.O. BOX 37

City **LITCHFIELD** State **CT** Zip Code **06759-0037**

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

Name of Employer **SELF** Occupation **COMMUNICATIONS**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.861B

Amount of Each Receipt this Period
-2500.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO PRIMARY**

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

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

5000.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ARTHUR HILL DIEDRICK

Mailing Address P.O. BOX 37
P.O. BOX 37

City LITCHFIELD State CT Zip Code 06759-0037

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

Name of Employer SELF Occupation COMMUNICATIONS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.960

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM CONVENTION

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

Mailing Address 107 OAKDALE AVENUE

City WINSTED State CT Zip Code 06098-1863

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

Name of Employer DIXON AND BROOKS PC Occupation ATTORNEY

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 / 31 / 2012

Transaction ID : SA11.927

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID DOLINSKY

Mailing Address 73 SCOVILLE RD

City WEST CORNWALL State CT Zip Code 06796-1217

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

Name of Employer DOLINSKY ASSOCIATES Occupation CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2012

Transaction ID : SA11.509

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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 17 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. DAVID DOLINSKY

Mailing Address 73 SCOVILLE RD

City WEST CORNWALL State CT Zip Code 06796-1217

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

Name of Employer DOLINSKY ASSOCIATES Occupation CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : SA11.650

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ELIZABETH K. DONOVAN

Mailing Address 529 MILTON RD

City LITCHFIELD State CT Zip Code 06759-2111

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

Name of Employer CASE FLOW COORDINATOR Occupation STATE OF CT JUDICIAL BRANCH

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 / 31 / 2012

Transaction ID : SA11.943

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS PATRICK DORE JR.

Mailing Address 70 SOUTH MAIN STREET

City SHARON State CT Zip Code 06069-2246

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

Name of Employer DAVIS, POLK & WARDELL Occupation LAWYER

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
02 / 29 / 2012

Transaction ID : SA11.583

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 18 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
PAMELA DOWLING

Mailing Address **54 WESTWOOD ROAD**

City **WEST HARTFORD** State **CT** Zip Code **06117-2252**

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

Name of Employer **SELF** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.812

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNE C. DRANGINIS

Mailing Address **P.O. BOX 39**

City **LITCHFIELD** State **CT** Zip Code **06759-0039**

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

Name of Employer **ROME MCGWIGAN PC** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.952

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **108 IVES RD**

City **GOSHEN** State **CT** Zip Code **06756-2120**

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

Name of Employer **PORTFOLIO PROPERTIES GROUP, LLC** Occupation **OWNER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.954

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 19 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. RICHARD A. DUPONT

Mailing Address 51 DEER RUN

City: WATERTOWN State: CT Zip Code: 06795-1131

FEC ID number of contributing federal political committee: C

Name of Employer: RESOURCE DEVELOPMENT ASSOCIATES Occupation: OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 27 / 2012

Transaction ID : SA11.880

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GARY EUCALITTO

Mailing Address 55 PROPRIETORS LANE

City: TORRINGTON State: CT Zip Code: 06790-8602

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: BUILDER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 22 / 2012

Transaction ID : SA11.742

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW L. EVANS

Mailing Address 4300 400 3RD AVENUE SW

City: CALGARY State: CA Zip Code: 00000

FEC ID number of contributing federal political committee: C

Name of Employer: ARC FINANCIAL CORP Occupation: SENIOR VICE PRESIDENT AND DIRECTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : SA11.919

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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 20 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN B. FAHEY JR.

Mailing Address **29 CAMP DUTTON ROAD**
P.O. BOX 856

City **LITCHFIELD** State **CT** Zip Code **06759-4109**

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

Name of Employer **FAHEY REALTORS** Occupation **REALTOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.950

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. BRIAN M. FENTY

Mailing Address **450 WEST 17TH STREET**
APT 2306

City **NEW YORK** State **NY** Zip Code **10011-5835**

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

Name of Employer **HAMILTON INV** Occupation **PRIVATE INVESTOR**

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 / 08 / 2012

Transaction ID : SA11.615

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN H. FIELD

Mailing Address **317 GOSHEN ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-2404**

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

Name of Employer **RETIRED** Occupation **N/A**

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
03 / 16 / 2012

Transaction ID : SA11.665

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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 21 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. ANNE J. FITZGERALD

Mailing Address **36 NORTH STREET**

City **WATERTOWN** State **CT** Zip Code **06795-2106**

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

Name of Employer **WATERTOWN LIBRARY** Occupation **LIBRARIAN**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : SA11.616

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY FITZGERALD

Mailing Address **36 NORTH STREET**

City **WATERTOWN** State **CT** Zip Code **06795-2106**

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

Name of Employer **CARMODY & TORRANCE** Occupation **LAWYER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

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

Transaction ID : SA11.582

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MELANIE M. FLAHERTY

Mailing Address **21 NEILL DR**

City **WATERTOWN** State **CT** Zip Code **06795-1706**

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

Name of Employer **ROBINSON & COLE** Occupation **MANAGER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.878

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 22 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. PORTER F. FLEMING

Mailing Address 116 EAST 63RD STREET, APT. 3B

City State Zip Code
NEW YORK NY 10065-7265

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

Name of Employer Occupation
FROMMER LAWRENCE & HAIG ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 09 / 2012

Transaction ID : SA11.419

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PORTER F. FLEMING

Mailing Address 116 EAST 63RD STREET, APT. 3B

City State Zip Code
NEW YORK NY 10065-7265

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

Name of Employer Occupation
FROMMER LAWRENCE & HAIG ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.550

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM A. FLUTY

Mailing Address 727 STONE CHURCH ROAD

City State Zip Code
WHEELING WV 26003-7452

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 09 / 2012

Transaction ID : SA11.422

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

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

2850.00

**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 23 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM A. FLUTY

Mailing Address **727 STONE CHURCH ROAD**

City **WHEELING** State **WV** Zip Code **26003-7452**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 09 / 2012

Transaction ID : SA11.423

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM A. FLUTY

Mailing Address **727 STONE CHURCH ROAD**

City **WHEELING** State **WV** Zip Code **26003-7452**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 09 / 2012

Transaction ID : SA11.424

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DAVID J. FRAUENHOFER

Mailing Address **602 WEST WAKEFIELD ROAD
P.O. BOX 821**

City **WINSTED** State **CT** Zip Code **06098-2928**

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

Name of Employer **WALL, WALL AND FRAUENHOFER** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.553

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 24 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. RICHARD FURNISS JR.

Mailing Address 163 CORNWALL HOLLOW ROAD

City WEST CORNWALL State CT Zip Code 06796-1621

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **570.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.863

Amount of Each Receipt this Period
70.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT W. GARTHWAIT SR.

Mailing Address PO BOX 1367

City WATERBURY State CT Zip Code 06721-1367

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

Name of Employer CLY. DEL MFG. CO. Occupation CHAIRMAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : SA11.651

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID M. GEREMIA SR

Mailing Address 10 EVANS PASSWAY

City MORRIS State CT Zip Code 06763-1329

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

Name of Employer DURABLE RADIATOR & AUTO BODY Occupation PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.853

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1070.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM A. GLASER

Mailing Address **31 WEST 21ST STREET, #10**

City **NEW YORK** State **NY** Zip Code **10010-7044**

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

Name of Employer **RETIRED** Occupation **N/A**

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 / 12 / 2012

Transaction ID : SA11.692

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. LIONEL GOLDFRANK III

Mailing Address **MOLE'S HILL FARM
201 MILLERTON ROAD P.O. BOX 188**

City **SHARON** State **CT** Zip Code **06069-2068**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2012

Transaction ID : SA11.892

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES C. GOODALE

Mailing Address **919 THIRD AVE**

City **NEW YORK** State **NY** Zip Code **10022-3902**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

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 / 28 / 2012

Transaction ID : SA11.888

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 26 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
LESLIE MACKENZIE GOTTLIEB
 Mailing Address 42 UPPER MAIN STREET
 City SHARON State CT Zip Code 06069-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREY HOUSE PUBLISHING Occupation PRESIDENT
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012
Transaction ID : SA11.587
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM W. GRIDLEY
 Mailing Address 697 WEST END AVENUE, APT 11C
 City NEW YORK State NY Zip Code 10025-6920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HARBOR DRIVE ASSET MANAGEMENT LLC Occupation MANAGING DIRECTOR
 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 / 08 / 2012
Transaction ID : SA11.612
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DOUGLAS A. HAMILTON
 Mailing Address 47 TANNER HILL ROAD
 City WARREN State CT Zip Code 06777-1118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PRIVATE INVESTOR
 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 / 08 / 2012
Transaction ID : SA11.608
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

2950.00

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

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

FOR LINE NUMBER: PAGE 27 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM A. HAMZY

Mailing Address **2 MINOR ROAD**

City **TERRYVILLE** State **CT** Zip Code **06786-4002**

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

Name of Employer **THE HAMZY LAW FIRM, LLC** Occupation **ATTORNEY**

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 / 30 / 2012

Transaction ID : SA11.905

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DREW HARLOW

Mailing Address **P.O. BOX 96**
93 BALDWIN HILL RD.

City **LITCHFIELD** State **CT** Zip Code **06759-0096**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 22 / 2012

Transaction ID : SA11.748

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM REES HARRIS JR.

Mailing Address **PO BOX 629**
30 WASHNEE HT

City **SALISBURY** State **CT** Zip Code **06068-0629**

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

Name of Employer **SELF-EMPLOYED** Occupation **PILOT**

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
01 / 27 / 2012

Transaction ID : SA11.491

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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 28 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
DEBORAH R. HARTNETT

Mailing Address P.O. BOX 1585

City LITCHFIELD State CT Zip Code 06759-1585

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

Name of Employer NOVENS Occupation ADMINISTRATOR

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
03 / 31 / 2012

Transaction ID : SA11.947

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD P. HAYES JR.

Mailing Address 1481 PLEASANT VALLEY ROAD

City MANCHESTER State CT Zip Code 06042-1664

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

Name of Employer SELF Occupation REAL ESTATE DEVELOPER

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 / 02 / 2012

Transaction ID : SA11.578

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ARNOLD J. HEIMLER

Mailing Address 198 BENTON ROAD
P.O. BOX 358

City MORRIS State CT Zip Code 06763-1825

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : SA11.909

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1000.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER M. HILL

Mailing Address 18 WESTOVER LANE
P.O. BOX 940

City LITCHFIELD State CT Zip Code 06759-3923

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

Name of Employer LITCHFIELD FORD Occupation PRESIDENT

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
03 / 08 / 2012

Transaction ID : SA11.629

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JANE B. HINKEL

Mailing Address 149 OLD SOUTH RD

City LITCHFIELD State CT Zip Code 06759-4001

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

Name of Employer FAHEY & ASSOCIATES Occupation REALTOR

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 / 22 / 2012

Transaction ID : SA11.751

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT F. HOERLE

Mailing Address 155 EAST 72

City NEW YORK State NY Zip Code 10021-4371

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

Name of Employer STONE RUN CAPITAL LLC Occupation INVESTMENT MANAGEMENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

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

Transaction ID : SA11.547

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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 30 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ROBERT F. HOERLE

Mailing Address 155 EAST 72

City State Zip Code
NEW YORK NY 10021-4371

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

Name of Employer Occupation
STONE RUN CAPITAL LLC INVESTMENT MANAGEMENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

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

Transaction ID : SA11.548

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

Mailing Address 155 EAST 72ND ST

City State Zip Code
NEW YORK NY 10021-4371

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

Name of Employer Occupation
RETIRED N/A

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 29 2012

Transaction ID : SA11.902

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ANDREW M. HOFFMAN

Mailing Address 237 E. 17TH STREET APT 430

City State Zip Code
NEW YORK NY 10003-3664

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

Name of Employer Occupation
HSBC INFORMATION REQUESTED PER BEST EFF

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 08 2012

Transaction ID : SA11.614

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

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

5250.00

**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 31 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
I. BRADLEY HOFFMAN

Mailing Address P.O. BOX 280952

City EAST HARTFORD State CT Zip Code 06128-0952

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

Name of Employer HOFFMAN AUTO GROUP Occupation AUTOMOBILE DEALER

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 / 27 / 2012

Transaction ID : SA11.867

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PETER HOUDLIN

Mailing Address 77 RIVER ROAD

City WASHINGTON DEPOT State CT Zip Code 06794-1513

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

Name of Employer ERICSON INSURANCE SERVICES LLC Occupation INSURANCE AGENT

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 / 07 / 2012

Transaction ID : SA11.500

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SPENCER M. HOULDIN

Mailing Address 84 GARNET ROAD

City ROXBURY State CT Zip Code 06783-2033

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

Name of Employer ERICSON INSURANCE Occupation INSURANCE AGENT

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 / 07 / 2012

Transaction ID : SA11.499

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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 32 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JONATHAN ILANY

Mailing Address 212 GRANTVILLE ROAD

City WINSTED State CT Zip Code 06098-2404

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.632

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN ILANY

Mailing Address 212 GRANTVILLE ROAD

City WINSTED State CT Zip Code 06098-2404

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.632B

Amount of Each Receipt this Period
 -2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. JONATHAN ILANY

Mailing Address 212 GRANTVILLE ROAD

City WINSTED State CT Zip Code 06098-2404

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.969

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM CONVENTION

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

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

5000.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
IAN M. INGERSOLL

Mailing Address 136 TOWN ST

City WEST CORNWALL State CT Zip Code 06796-1611

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

Name of Employer SELF-EMPLOYED Occupation CABINETMAKER

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 / 31 / 2012

Transaction ID : SA11.940

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN E. JANCO SR.

Mailing Address 213 ALLISON DRIVE

City TORRINGTON State CT Zip Code 06790-3151

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

Name of Employer TORRINGTON SAVINGS BANK Occupation BANK OFFICER

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 / 20 / 2012

Transaction ID : SA11.762

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES F. JOHNSON

Mailing Address 134 HAGEMAN SHEAN RD

City GOSHEN State CT Zip Code 06756-1103

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

Name of Employer RETIRED Occupation LAWYER

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 / 27 / 2012

Transaction ID : SA11.496

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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 34 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
THEODORE H. JOHNSON

Mailing Address 141 S. MOUNTAIN DR

City State Zip Code
NEW BRITAIN CT 06052-1511

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

Name of Employer Occupation
RETIRED N/A

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
01 / 27 / 2012

Transaction ID : SA11.494

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KATHY K. JORGENSEN

Mailing Address P.O. BOX 91
P.O. BOX 91

City State Zip Code
GOSHEN CT 06756-0091

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

Name of Employer Occupation
STITCHES LLC OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11.719

Amount of Each Receipt this Period
70.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. FREDERICK KAUFMAN

Mailing Address 176 BROADWAY APT 11E

City State Zip Code
NEW YORK NY 10038-2518

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

Name of Employer Occupation
CUNY PROFESSOR

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 / 08 / 2012

Transaction ID : SA11.611

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1320.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. RUTH C. KEEFE

Mailing Address P.O. BOX 234
P.O. BOX 234

City LITCHFIELD State CT Zip Code 06759-0234

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11.720

Amount of Each Receipt this Period
35.00
 CONTRIBUTION

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

Mailing Address 62 COLONY RD

City WEST HARTFORD State CT Zip Code 06117-2216

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.822

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM H. KETCHAM

Mailing Address 516 36TH AVE E.

City SEATTLE State WA Zip Code 98112-4223

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

Name of Employer SARAFIN PARTNERS LLC Occupation MANAGING PARTNER

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
01 / 09 / 2012

Transaction ID : SA11.416

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

2535.00

**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 105
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) MR. DANIEL H. KRAUT		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2012
Mailing Address 163 BEACH STREET		Transaction ID : SA11.672
City LITCHFIELD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation N/A	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) MR. BRADLEY KULMAN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 08 / 2012
Mailing Address 336 W. END AVE APT 11C		Transaction ID : SA11.613
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer STROOCK & STROOCK & LAWYERS	Occupation LAWYER	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MR. GEORGE LACAPRA JR.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2012
Mailing Address 181 CURTISS LANE		Transaction ID : SA11.702
City WATERTOWN	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer UNIMETAL SURFACE FINISHING, LLC	Occupation EXECUTIVE MANAGEMENT	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY A. LALONDE

Mailing Address 208 WELLSFORD DRIVE

City State Zip Code
GOSHEN CT 06756-1903

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

Name of Employer Occupation
TORRINGTON SAVINGS BANK BANKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11.789

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. J. ALLEN LAMB

Mailing Address PO BOX 306

City State Zip Code
SOUTHINGTON CT 06489-0306

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

Name of Employer Occupation
SYSTEM AIRE SUPPLY CORP PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 15 / 2012

Transaction ID : SA11.653

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEDD F. LEVINE

Mailing Address 84 PROSPECT STREET

City State Zip Code
LITCHFIELD CT 06759-2502

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

Name of Employer Occupation
NW CANCER CENTER DOCTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.552

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 38 OF 105
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MRS. DIANE V. LIBBY

Mailing Address 334 ALLISON DR

City State Zip Code
TORRINGTON CT 06790-3152

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

Name of Employer Occupation
ADAMSSAMARTINO CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.898

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 2580 Pine Lake Road

City State Zip Code
Orchard Lake MI 48324

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA16.200

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOUGLAS FRED LONDAL

Mailing Address 29 STURGIS ROAD
29 STURGIS ROAD

City State Zip Code
BRONXVILLE NY 10708-5017

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

Name of Employer Occupation
NEW MOUNTAIN CAPITAL PRIVATE EQUITY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2012

Transaction ID : SA11.434

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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 39 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. LUCKER

Mailing Address 88 BLUE RIDGE DR

City State Zip Code
SIMSBURY CT 06070-3053

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

Name of Employer Occupation
DELOITTE CONSULTING LLP MANAGEMENT CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2012

Transaction ID : SA11.493

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN R. LUCKER

Mailing Address 88 BLUE RIDGE DR

City State Zip Code
SIMSBURY CT 06070-3053

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

Name of Employer Occupation
DELOITTE CONSULTING LLP MANAGEMENT CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11.722

Amount of Each Receipt this Period
70.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES B. LYON

Mailing Address CITY PLACE 1

City State Zip Code
HARTFORD CT 06103-3432

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

Name of Employer Occupation
MURTHA CULLINA ATTORNEY

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
01 / 19 / 2012

Transaction ID : SA11.470

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

570.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. ROBERT A. MADDOX JR.

Mailing Address 104 DEERWOOD DRIVE

City State Zip Code
BETHLEHEM CT 06751-2304

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

Name of Employer Occupation
STERLING PLANET CHIEF SUSTAINABILITY OFFICER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11.666

Amount of Each Receipt this Period
140.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JONATHAN MALKIN

Mailing Address 770 LEXINGTON AVE

City State Zip Code
NEW YORK NY 10065-8165

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

Name of Employer Occupation
ATP CAPITAL FOUNDER

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 / 26 / 2012

Transaction ID : SA11.894

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 341 MILTON RD

City State Zip Code
LITCHFIELD CT 06759-2203

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

Name of Employer Occupation
RETIRED N/A

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 / 26 / 2012

Transaction ID : SA11.844

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1390.00

**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 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. BRIAN E. MATTIELLO

Mailing Address 636 EAST MAIN STREET

City State Zip Code
TORRINGTON CT 06790-5609

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

Name of Employer Occupation
CHARLOTTE HUNGERFORD ADMINISTRATOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11.730

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN R. MCCOY M.D.

Mailing Address 95 MARSH RD

City State Zip Code
LITCHFIELD CT 06759-3012

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

Name of Employer Occupation
LITCHFIELD HILLS ORTHOPEDICS M.D.

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.813

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. H. BRUCE MCEVER

Mailing Address 198 WEATOGUE RD

City State Zip Code
SALISBURY CT 06068-1421

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

Name of Employer Occupation
BERKSHIRE CAPITAL SEC INVESTMENT BANKER

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 / 22 / 2012

Transaction ID : SA11.750

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 42 OF 105

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JOHN A. MCLENDON SR

Mailing Address 46 SPEYSIDE CIR

City State Zip Code
 PITTSBORO NC 27312-8638

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

Name of Employer Occupation
 N/A RETIRED

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 / 31 / 2012

Transaction ID : SA11.931

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. AL MENCUCINI

Mailing Address 215 WELLSFORD ROAD

City State Zip Code
 GOSHEN CT 06756-1904

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

Name of Employer Occupation
 LOGAN AND MENCUCINI INFORMATION REQUESTED PER BEST EFF

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 / 08 / 2012

Transaction ID : SA11.633

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. GEORGIANNA L. MIDDLEBROOK

Mailing Address 204 NETTLETON HOLLOW ROAD

City State Zip Code
 WASHINGTON CT 06793-1611

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

Name of Employer Occupation
 RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : SA11.787

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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 43 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. NICHOLAS J. MOORE

Mailing Address **88 BUTTER RD**
P.O. BOX 457

City **SHARON** State **CT** Zip Code **06069-2407**

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

Name of Employer **SELF EMPLOYEED** Occupation **CONTRACTOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 06 / 2012

Transaction ID : SA11.510

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN W. MOROSANI

Mailing Address **164 WIGWAM ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-3827**

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

Name of Employer **LAUREL RIDGE FARM** Occupation **FARMER**

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 / 31 / 2012

Transaction ID : SA11.946

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN MOSLER

Mailing Address **89 MURRAY 120**

City **NEW YORK** State **NY** Zip Code **10007-2281**

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

Name of Employer **SELF** Occupation **SCULPTER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2012

Transaction ID : SA11.609

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 44 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. GEORGE MOTEL III

Mailing Address 599 OLD MIDDLE ST

City State Zip Code
GOSHEN CT 06756-2205

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

Name of Employer Occupation
SUNSET MEADOW VINEYARDS INFORMATION REQUESTED PER BEST EFF

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.821

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 135 OENOKE RIDGE

City State Zip Code
NEW CANAAN CT 06840-4107

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

Name of Employer Occupation
N/A RETIRED

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 / 31 / 2012

Transaction ID : SA11.944

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address P.O. BOX 1585

City State Zip Code
LITCHFIELD CT 06759-1585

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

Name of Employer Occupation
NOVENS INC PRESIDENT

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
03 / 31 / 2012

Transaction ID : SA11.948

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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 45 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. VICTOR M. MUSCHELL

Mailing Address 2700 TORRINGFORD STREET

City TORRINGTON State CT Zip Code 06790-2313

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
 _____ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2012

Transaction ID : SA11.763

Amount of Each Receipt this Period
 _____ 70.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALEXANDER NEAVE

Mailing Address 521 FIFTH AVENUE
 PUTNEY, TWOMBLY, HALL AND HIRSON

City NEW YORK State NY Zip Code 10175-0003

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

Name of Employer PUTNEY, TWOMBLY, HALL AND HIRSON Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11.721

Amount of Each Receipt this Period
 _____ 100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK D. NIELSEN

Mailing Address 3 PARLEY LANE

City RIDGEFIELD State CT Zip Code 06877-4903

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

Name of Employer PRAXAIR Occupation ATTORNEY

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
 02 / 06 / 2012

Transaction ID : SA11.512

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

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

_____ 1170.00

**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 46 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOSE W. NOYES

Mailing Address 12 HERB ROAD

City SHARON State CT Zip Code 06069-2326

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

Name of Employer RETIRED Occupation N/A

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 / 29 / 2012

Transaction ID : SA11.586

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. KAREN NUGENT

Mailing Address 334 SOUTH ST
P.O. BOX 1588

City LITCHFIELD State CT Zip Code 06759-4008

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

Name of Employer THE FORMAN SCHOOL Occupation REGISTERED NURSE

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 / 22 / 2012

Transaction ID : SA11.749

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM O. NUTTING

Mailing Address P.O. BOX 6725
21 PARK RD

City WHEELING State WV Zip Code 26003-0916

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

Name of Employer OGDEN NEWSPAPER INC Occupation EXEC/LAWYER

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 / 28 / 2012

Transaction ID : SA11.889

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

3050.00

**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 47 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JAMES P. O'LEARY

Mailing Address 235 HAGEMAN-SHEAN ROAD

City State Zip Code
GOSHEN CT 06756-1104

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

Name of Employer Occupation
RETIRED N/A

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 / 09 / 2012

Transaction ID : SA11.427

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND R. ONEGLIA

Mailing Address 70 CARRIAGG LANE

City State Zip Code
LITCHFIELD CT 06759-2327

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

Name of Employer Occupation
O & G CONSTRUCTION EXEC.

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.862

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND R. ONEGLIA

Mailing Address 70 CARRIAGG LANE

City State Zip Code
LITCHFIELD CT 06759-2327

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

Name of Employer Occupation
O & G CONSTRUCTION EXEC.

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.862B

Amount of Each Receipt this Period
-1000.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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 48 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND R. ONEGLIA

Mailing Address 70 CARRIAGG LANE

City State Zip Code
LITCHFIELD CT 06759-2327

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

Name of Employer Occupation
O & G CONSTRUCTION EXEC.

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11.967

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM CONVENTION

B. Full Name (Last, First, Middle Initial)
MR. JACK ORCHULLI

Mailing Address 446 HOLLOW TREE RIDGE ROAD

City State Zip Code
DARIEN CT 06820-3031

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2012

Transaction ID : SA11.501

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BENJAMIN H. PALETSKY

Mailing Address 43 BENTON RD

City State Zip Code
MORRIS CT 06763-1821

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

Name of Employer Occupation
E. INK HOLDINGS MARKETING MANAGER

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 / 15 / 2012

Transaction ID : SA11.652

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

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

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

800.00

**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 49 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. ROBERT L. PARKER

Mailing Address P.O. BOX 1424

City WASHINGTON State CT Zip Code 06793-0424

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

Name of Employer BANK OF AMERICA Occupation BANKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.803

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. ANN B. PATTON

Mailing Address P.O. BOX 1566

City LAKEVILLE State CT Zip Code 06039-1566

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11.565

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES N. PERKINS

Mailing Address 5 CONBOY HEIGHTS

City KENT State CT Zip Code 06757-1427

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

Name of Employer SELF Occupation SELF-EMPLOYED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2012

Transaction ID : SA11.761

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 50 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
SHERRY PHILLIPS

Mailing Address **58 MEMORIAL ROAD**

City **WEST HARTFORD** State **CT** Zip Code **06107-2207**

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

Name of Employer **PER SE, LLC** Occupation **OWNER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11.471

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARYL D. PLUNKETT

Mailing Address **45 BENEDICT AVENUE**

City **TARRYTOWN** State **NY** Zip Code **10591-4131**

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

Name of Employer **PLUNKETT & JAFFE GROUP** Occupation **ADMINISTRATOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.953

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LESLIE J. POLITO

Mailing Address **36 DUDLEY ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-3108**

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

Name of Employer **TORRINGTON AREA HEALTH DISTRICT** Occupation **R.N.**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11.790

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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 51 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. G. RICHARD REIS

Mailing Address 119 BRYNMOOR CT

City State Zip Code
GOSHEN CT 06756-2135

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2012

Transaction ID : SA11.664

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

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

Mailing Address 2 UPPER MAIN STREET
P.O. BOX 206

City State Zip Code
SHARON CT 06069-2008

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.569

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN B. RHODES

Mailing Address 74 FIFTH AVENUE
APT 9A

City State Zip Code
NEW YORK NY 10011-8007

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2012

Transaction ID : SA11.610

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

675.00

**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 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
JOHN RITTER

Mailing Address 37 SUNSET FARM ROAD

City WEST HARTFORD State CT Zip Code 06107-1313

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

Name of Employer FIRST NEW ENGLAND CAPITAL Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.811

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 37 SUNSET FARM ROAD

City WEST HARTFORD State CT Zip Code 06107-1313

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

Name of Employer FIRST NEW ENGLAND CAPITAL Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.811B

Amount of Each Receipt this Period
 -250.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

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

Mailing Address 37 SUNSET FARM ROAD

City WEST HARTFORD State CT Zip Code 06107-1313

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

Name of Employer FIRST NEW ENGLAND CAPITAL Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.959

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM CONVENTION

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 53 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ANNABELLE ROBBINS

Mailing Address **3 HYERDALE COURT**

City **GOSHEN** State **CT** Zip Code **06756-1718**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.824

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES K. ROBERTSON JR.

Mailing Address **54 OTIS DR.**

City **WATERTOWN** State **CT** Zip Code **06795-1504**

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

Name of Employer **CARMODY & TORRENCE** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2012

Transaction ID : SA11.874

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address **P.O. BOX 1738
28 JEWETT HILL RD.**

City **SHARON** State **CT** Zip Code **06069-1738**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **5470.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.564

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 54 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.606

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.606B

Amount of Each Receipt this Period
 -250.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.961

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM CONVENTION

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 55 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.800

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.800B

Amount of Each Receipt this Period
 -500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.962B

Amount of Each Receipt this Period
 -30.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO PRIMARY

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 56 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. MARY B. ROBERTSON

Mailing Address P.O. BOX 1738
28 JEWETT HILL RD.

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5470.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.964

Amount of Each Receipt this Period
30.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM GENERAL

B. Full Name (Last, First, Middle Initial)
MR. RICHARD F. ROCHOW

Mailing Address 2009 ROCKY BRANCH DRIVE

City FOREST State VA Zip Code 24551-2954

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

Name of Employer NOVATECH Occupation PRESIDENT/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
02 / 17 / 2012

Transaction ID : SA11.531

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN P. ROGAN

Mailing Address 5 PHEASANT LANE SPUR

City GREENWICH State CT Zip Code 06830-3817

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

Name of Employer RUSSELL REYNOLDS ASSOCIATES Occupation SEARCH CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2012

Transaction ID : SA11.607

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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 57 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. NORMAN ROGERS

Mailing Address 165 STEDMAN ROAD

City State Zip Code
NEW HARTFORD CT 06057-3111

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

Name of Employer Occupation
SELF ATTORNEY

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
02 / 28 / 2012

Transaction ID : SA11.558

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PAUL C. ROONEY JR.

Mailing Address 11 LILAC LANE

City State Zip Code
SHARON CT 06069-2302

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

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.561

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address 1750 WEED RD

City State Zip Code
TORRINGTON CT 06790-4341

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

Name of Employer Occupation
ELEVATOR SERVICE CO INC PRESIDENT

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 / 26 / 2012

Transaction ID : SA11.841

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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 58 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
FRANCIS E. RYAN

Mailing Address 78 ASHLEY DR

City State Zip Code
GOSHEN CT 06756-1813

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

Name of Employer Occupation
NORTHWEST HILLS RESTORATION CONTRACTOR

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 / 31 / 2012

Transaction ID : SA11.955

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. PHILIP SAMPONARO

Mailing Address P.O. BOX 245

City State Zip Code
LITCHFIELD CT 06759-0245

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : SA11.838

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PHILIP SAMPONARO

Mailing Address P.O. BOX 245

City State Zip Code
LITCHFIELD CT 06759-0245

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.949

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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 59 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
ALLYN SEYMOUR JR.

Mailing Address 42 WESTWOOD RD

City WEST HARTFORD State CT Zip Code 06117-2252

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.810

Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. THOMAS L. SEYMOUR

Mailing Address 62 COLONY ROAD

City WEST HARTFORD State CT Zip Code 06117-2216

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11.605

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL SHERR

Mailing Address 19 COOK STREET

City WASHINGTON DEPOT State CT Zip Code 06794-1509

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

Name of Employer VALASSIS Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2012

Transaction ID : SA11.533

Amount of Each Receipt this Period
 1050.00
 CONTRIBUTION

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 60 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. DANIEL SHERR

Mailing Address 19 COOK STREET

City WASHINGTON DEPOT State CT Zip Code 06794-1509

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

Name of Employer VALASSIS Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.801

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL SHERR

Mailing Address 19 COOK STREET

City WASHINGTON DEPOT State CT Zip Code 06794-1509

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

Name of Employer VALASSIS Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.801B

Amount of Each Receipt this Period
 -50.00
 CONTRIBUTION

[MEMO ITEM]
 REDESIGNATION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. DANIEL SHERR

Mailing Address 19 COOK STREET

City WASHINGTON DEPOT State CT Zip Code 06794-1509

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

Name of Employer VALASSIS Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2012

Transaction ID : SA11.966

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

[MEMO ITEM]
 REDESIGNATION FROM CONVENTION

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 61 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
NOEL A. SLOAN

Mailing Address **23 SMITH HILL LANE**

City **SALISBURY** State **CT** Zip Code **06068**

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

Name of Employer **BROWN BROTHERS HARRIMAN** Occupation **PRIVATE BANKER**

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 / 09 / 2012

Transaction ID : SA11.425

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES SMITH

Mailing Address **2 LEDGEWOOD RD**

City **WINCHESTER** State **MA** Zip Code **01890-3121**

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

Name of Employer **FORDHAM UNIVERSITY** Occupation **STUDENT**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 22 / 2012

Transaction ID : SA11.785

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. ORA K. SMITH

Mailing Address **10 GRACIE SQUARE, APT 10A**

City **NEW YORK** State **NY** Zip Code **10028-8031**

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

Name of Employer **RETIRED** Occupation **N/A**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11.551

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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 62 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. CLAYTON BLANCHARD SPENCER

Mailing Address 219 CHESTNUT HILL RD

City State Zip Code
LITCHFIELD CT 06759-4104

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF CONSULTANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.689

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN H. STAUB

Mailing Address 19 WOLCOTT ROAD

City State Zip Code
LITCHFIELD CT 06759-3509

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.704

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARSHA MELINDA STERLING

Mailing Address 254 GRANTVILLE RD
P.O. BOX 128

City State Zip Code
WINSTED CT 06098-2436

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CETIRE RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11.752

Amount of Each Receipt this Period

CONTRIBUTION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MS. MARSHA MELINDA STERLING

Mailing Address 254 GRANTVILLE RD
P.O. BOX 128

City WINSTED State CT Zip Code 06098-2436

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

Name of Employer CETIRE Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2210.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

Transaction ID : SA11.951

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID S. STUTT

Mailing Address 529 2ND STREET

City BROOKLYN State NY Zip Code 11215-2607

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

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
02 / 28 / 2012

Transaction ID : SA11.574

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MATTHEW SWEET

Mailing Address P.O. BOX 323

City GOSHEN State CT Zip Code 06756-0323

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

Name of Employer UNION SAVINGS Occupation FINANCIAL ADVISOR

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 / 26 / 2012

Transaction ID : SA11.820

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 64 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM J. SWEETMAN

Mailing Address 1612 MANCHESTER COURT

City State Zip Code
NAPLES FL 34109-0429

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

Name of Employer Occupation
DWAN AND COMPANY BEER WHOLESALER

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
02 / 15 / 2012

Transaction ID : SA11.517

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER J. TAVINO

Mailing Address 68 SOUTH STREET
P.O. BOX 1766

City State Zip Code
LITCHFIELD CT 06759-4022

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

Name of Employer Occupation
SELF ENGINEERING

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : SA11.592

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GEORGE TIERNEY

Mailing Address 4718 CONGRESS STREET

City State Zip Code
FAIRFIELD CT 06824-1721

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

Name of Employer Occupation
CITI GROUP BANKING

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.639

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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 65 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. PETER TILLOU

Mailing Address 109 PROSPECT ST
P.O. BOX 145

City LITCHFIELD State CT Zip Code 06759-2503

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

Name of Employer PETER TILLOU FINE ARTS Occupation FINE ART DEALER

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 / 30 / 2012

Transaction ID : SA11.918

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LILLIAN E. TOBIN

Mailing Address 14 WELDON CT

City GOSHEN State CT Zip Code 06756-1701

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

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 / 13 / 2012

Transaction ID : SA11.705

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
D. H. TOWNSEND

Mailing Address 8660 SEACREST DR

City VERO BEACH State FL Zip Code 32963-9602

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

Name of Employer RETIRED Occupation N/A

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 / 26 / 2012

Transaction ID : SA11.849

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 66 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN WYATT UHLEIN

Mailing Address 19 SAW MILL ROAD

City LITCHFIELD State CT Zip Code 06759-2001

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11.718

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. NANCY R. WADHAMS

Mailing Address 533 OLD MIDDLE STREET

City GOSHEN State CT Zip Code 06756-2205

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 19 / 2012

Transaction ID : SA11.729

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ANNICK FAURE WADSWORTH

Mailing Address 183 WALNUT STREET

City BROOKLINE State MA Zip Code 02445-6728

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

Name of Employer HOMEMAKER 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
 01 / 09 / 2012

Transaction ID : SA11.417

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

2675.00

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

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

FOR LINE NUMBER: PAGE 67 OF 105
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MR. DAVID J. WATSON

Mailing Address 5080 N. 40TH STREET, SUITE 375

City State Zip Code
PHOENIX AZ 85018-2190

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

Name of Employer Occupation
SELF INVESTOR

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
02 / 24 / 2012

Transaction ID : SA11.545

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HENRY FRANK WEEDEN

Mailing Address 256 ALLEN STREET

City State Zip Code
TRENTON NJ 08618-3907

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

Name of Employer Occupation
ANA DESIGN CORP OWNER/CANDLE MANUFACTURER

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
01 / 15 / 2012

Transaction ID : SA11.433

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSHUA J. WEEKS

Mailing Address 9 RIDING CLUB ROAD

City State Zip Code
WILTON CT 06897-1734

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

Name of Employer Occupation
DANBURY PORSCHE PRESIDENT

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 / 06 / 2012

Transaction ID : SA11.593

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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: (check only one)	PAGE 68 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
SARAH K. WELCH

Mailing Address **P.O. BOX 128**

City **LITCHFIELD** State **CT** Zip Code **06759**

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

Name of Employer **AXA ADVISORS** Occupation **FINANCIAL CONSULTANT**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2012

Transaction ID : SA11.958

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RICHARD V. WIEHL

Mailing Address **204 SPRING HILL RD**

City **TRUMBULL** State **CT** Zip Code **06611-1356**

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

Name of Employer **CONSUMER PETROLEUM** Occupation **EXECUTIVE**

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 / 30 / 2012

Transaction ID : SA11.911

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARY C. WILLIAMS

Mailing Address **28 LANE STREET**

City **KENT** State **CT** Zip Code **06757-1322**

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

Name of Employer **TOWN OF KENT** Occupation **SELECTMAN**

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 / 05 / 2012

Transaction ID : SA11.589

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 69 OF 105
	<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)
Roraback for Congress

A. Full Name (Last, First, Middle Initial)
MRS. ELAINE WITHERSPOON

Mailing Address 90 CHESTNUT HILL ROAD

City State Zip Code
LITCHFIELD CT 06759-4103

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

Name of Employer Occupation
RETIRED N/A

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
03 / 23 / 2012

Transaction ID : SA11.786

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TERRIE E. WOOD

Mailing Address 50 SAINT NICHOLAS ROAD

City State Zip Code
DARIEN CT 06820-2823

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

Name of Employer Occupation
STATE OF CT REPRESENTATIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2462.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2012

Transaction ID : SA11.649

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EDWARD WRIGHT

Mailing Address 125 MILTON ROAD

City State Zip Code
GOSHEN CT 06756-1605

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

Name of Employer Occupation
FAY & WRIGHT INC CONTRACTOR

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 / 07 / 2012

Transaction ID : SA11.618

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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 70 OF 105
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) ANTHONY YURGAITIS		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2012
Mailing Address 31 WEST 54TH ST		Transaction ID : SA11.907
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MANOLO BLAHNIK USA, LTD	Occupation PARTNER	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. GERALD ZORDAN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2012
Mailing Address P.O. BOX 926		Transaction ID : SA11.591
City TORRINGTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BORGESON UNIVERSAL	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) JULIE G. ZYLA		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2012
Mailing Address 30 HICKORY LANE		Transaction ID : SA11.823
City WEST HARTFORD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer CIGNA	Occupation MARKETING COMMUNICATIONS DIRECTOR	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	108170.00

**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 71 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Cheshire RTC		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2012
Mailing Address 1068 Avon Blvd		Amount of Each Disbursement this Period 22.00
City Cheshire State CT Zip Code 06410	Purpose of Disbursement Fundraising Event 007 Category/Type	
Candidate Name		Transaction ID : 59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. New Britain Republican Town Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address P.O. Box 1630		Amount of Each Disbursement this Period 75.00
City New Britain State CT Zip Code 06053	Purpose of Disbursement AD Book 007 Category/Type	
Candidate Name		Transaction ID : 37
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Plainville Republican Town Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address Sherman St		Amount of Each Disbursement this Period 105.00
City Plainville State CT Zip Code 06062	Purpose of Disbursement Campaign Event 007 Category/Type	
Candidate Name		Transaction ID : 39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	202.00
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 72 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Plymouth Republican Town Committee			Date of Disbursement MM / DD / YYYY 02 / 24 / 2012
Mailing Address 4 Arrow Drive			Amount of Each Disbursement this Period 513.75 Transaction ID : 36
City Terryville	State CT	Zip Code 06786	
Purpose of Disbursement Campaign Event	Category/ Type 007		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Elizabeth Blagys			Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address 65 Clarkson Street			Amount of Each Disbursement this Period 108.75 Transaction ID : 22
City Bridgeport	State CT	Zip Code 06605	
Purpose of Disbursement Data Entry Service	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Marc Dillion			Date of Disbursement MM / DD / YYYY 01 / 02 / 2012
Mailing Address Park Ave			Amount of Each Disbursement this Period 300.00 Transaction ID : 1
City Canaan	State CT	Zip Code 06018	
Purpose of Disbursement Consulting Service	Category/ Type 001		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	513.75
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 73 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Marc Dillion			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012	
Mailing Address Park Ave			Amount of Each Disbursement this Period 3000.00	
City Canaan	State CT	Zip Code 06018	Transaction ID : 47	
Purpose of Disbursement Consultant Service		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Kara Dowling			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012	
Mailing Address P.O. Box 357			Amount of Each Disbursement this Period 274.22	
City Goshen	State CT	Zip Code 06756	Transaction ID : 11	
Purpose of Disbursement Event Reimbursement		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Chris DuPont			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012	
Mailing Address 48 North Street			Amount of Each Disbursement this Period 575.29	
City Watertown	State CT	Zip Code 06795	Transaction ID : 18	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3849.51
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 74 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Chris DuPont			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012	
Mailing Address 48 North Street			Amount of Each Disbursement this Period 575.29	
City Watertown	State CT	Zip Code 06795	Transaction ID : 30	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Chris DuPont			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012	
Mailing Address 48 North Street			Amount of Each Disbursement this Period 1150.00	
City Watertown	State CT	Zip Code 06795	Transaction ID : 34	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Chris DuPont			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2012	
Mailing Address 48 North Street			Amount of Each Disbursement this Period 217.47	
City Watertown	State CT	Zip Code 06795	Transaction ID : 43	
Purpose of Disbursement mileage Reimbursement		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1942.76
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 75 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Chris DuPont		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 1150.38
City Watertown	State CT	
Purpose of Disbursement salary	Category/ Type 001	
Candidate Name		Transaction ID : 44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Chris DuPont		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 67.78
City Watertown	State CT	
Purpose of Disbursement reimburse photo prints	Category/ Type 001	
Candidate Name		Transaction ID : 49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Chris DuPont		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2012
Mailing Address 48 North Street		Amount of Each Disbursement this Period 1150.58
City Watertown	State CT	
Purpose of Disbursement salary	Category/ Type 001	
Candidate Name		Transaction ID : 61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	2368.74
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 76 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 2808.02
City CANAAN	State CT	
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name		Transaction ID : 19
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 1123.00
City CANAAN	State CT	
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name		Transaction ID : 35
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 1123.00
City CANAAN	State CT	
Purpose of Disbursement salary	Category/ Type 001	
Candidate Name		Transaction ID : 45
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	5054.02
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 77 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Anna-Elysapeth McGuire		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2012
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 1123.00 Transaction ID : 62
City CANAAN	State CT	
Purpose of Disbursement Salary		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Emily Minacci		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2012
Mailing Address Marilyn Lane		Amount of Each Disbursement this Period 200.00 Transaction ID : 62B
City Canaan	State CT	
Purpose of Disbursement Data Entry		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrew Roraback		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address P.O. BOX 357		Amount of Each Disbursement this Period 176.00 Transaction ID : 12
City GOSHEN	State CT	
Purpose of Disbursement reimbursement stamps		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1499.00
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 78 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Andrew Roraback		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address P.O. BOX 357		Amount of Each Disbursement this Period 392.17
City GOSHEN	State CT	
Zip Code 06756	Purpose of Disbursement Reimbursement printing	Category/ Type 003
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. Andrew Roraback		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. BOX 357		Amount of Each Disbursement this Period 862.62
City GOSHEN	State CT	
Zip Code 06756	Purpose of Disbursement mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) c. Tamara Tragakiss		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 100 HART DRIVE		Amount of Each Disbursement this Period 599.99
City LITCHFIELD	State CT	
Zip Code 06759	Purpose of Disbursement reimburse expense	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	1854.78
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 79 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Adams Samartino & Company		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address P.O. Box Box 273		Amount of Each Disbursement this Period 3000.00
City Bristol	State CT	
Zip Code 06011-0273	Purpose of Disbursement Accounting Service	Transaction ID : 21
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AdComm		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address ASHLEY FALLS ROAD		Amount of Each Disbursement this Period 51.05
City CANAAN	State CT	
Zip Code 06018	Purpose of Disbursement ideal stamps	Transaction ID : 134
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) c. Alfredo's.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address Water Street		Amount of Each Disbursement this Period 46.20
City Torrington	State CT	
Zip Code 06790	Purpose of Disbursement Volunteers lunch	Transaction ID : 131
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3097.25
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 80 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Align Media LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address 921 Cavalry Ride Trail		Amount of Each Disbursement this Period 4500.00
City AUSTIN State TX Zip Code 78732	Purpose of Disbursement Wed Design Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	Transaction ID : 5

Full Name (Last, First, Middle Initial) B. Align Media		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 921 Cavalry Ride Trail		Amount of Each Disbursement this Period 800.00
City Austin State CT Zip Code 78732	Purpose of Disbursement Web Consultant Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	Transaction ID : 50

Full Name (Last, First, Middle Initial) c. Align Media LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address 921 Cavalry Ride Trail		Amount of Each Disbursement this Period 1280.00
City AUSTIN State TX Zip Code 78732	Purpose of Disbursement Web Maintenance Data Service Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	Transaction ID : 6

SUBTOTAL of Disbursements This Page (optional).....	6580.00
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 81 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. ATT		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address P.O. Box 5082		Amount of Each Disbursement this Period 100.00
City Carol Stream	State IL	
Zip Code 60188	Purpose of Disbursement deposit - internet	Transaction ID : 135
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ATT		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 5082		Amount of Each Disbursement this Period 296.18
City Carol Stream	State IL	
Zip Code 60188	Purpose of Disbursement phone service	Transaction ID : 52
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ATT		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address P.O. Box 5082		Amount of Each Disbursement this Period 145.84
City Carol Stream	State IL	
Zip Code 60188	Purpose of Disbursement phone	Transaction ID : 68
Candidate Name	Category/ Type 001	
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).....	542.02
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 82 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. ATT Mobility		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2012
Mailing Address P.O. BOX 6463		Amount of Each Disbursement this Period 139.53
City CAROL STREAM	State IL	
Zip Code 60197-6463	Purpose of Disbursement Cell phone	Transaction ID : 2
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ATT Mobility		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address P.O. BOX 6463		Amount of Each Disbursement this Period 188.85
City CAROL STREAM	State IL	
Zip Code 60197-6463	Purpose of Disbursement cell phone	Transaction ID : 22B
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ATT Mobility		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. BOX 6463		Amount of Each Disbursement this Period 152.96
City CAROL STREAM	State IL	
Zip Code 60197-6463	Purpose of Disbursement cell phones	Transaction ID : 48
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	481.34
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 83 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. ATT Mobility		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address P.O. BOX 6463		Amount of Each Disbursement this Period 141.81 Transaction ID : 66
City CAROL STREAM	State IL	
Zip Code 60197-6463	Purpose of Disbursement cell phone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Casa DiJanna		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 545 Main Street		Amount of Each Disbursement this Period 480.00 Transaction ID : 54
City Watertown	State CT	
Zip Code 06795	Purpose of Disbursement event expense	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chuck's Steak House		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 20 Seger Street		Amount of Each Disbursement this Period 200.00 Transaction ID : 42
City Danbury	State CT	
Zip Code 06810	Purpose of Disbursement Event Expense	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	821.81
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 84 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Commission of Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2012
Mailing Address 25 Sigourney Street		Amount of Each Disbursement this Period 254.51
City Hartford	State CT Zip Code 06103	
Purpose of Disbursement CT Withholding	001	Transaction ID : 82
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Commission of Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 25 Sigourney Street		Amount of Each Disbursement this Period 79.21
City Hartford	State CT Zip Code 06103	
Purpose of Disbursement CT Withholding	001	Transaction ID : 83
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	2/21 payroll
State: District:		

Full Name (Last, First, Middle Initial) C. Commission on Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address 25 Sigourney Street		Amount of Each Disbursement this Period 79.21
City Hartford	State CT Zip Code 06106	
Purpose of Disbursement CT Withholding	001	Transaction ID : 84b
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	3/21/2012
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	412.93
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 85 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Compumail		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		04		2012
M M	/	D D	/	Y Y Y Y								
01		04		2012								
Mailing Address 298 Captain Lewis Dr.		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Southington</td> <td>CT</td> <td>06489</td> </tr> </table>			City	State	Zip Code	Southington	CT	06489				
City	State	Zip Code										
Southington	CT	06489										
Purpose of Disbursement printing/data processing		<table border="1"> <tr> <td>1888.12</td> </tr> </table>	1888.12									
1888.12												
Candidate Name		Transaction ID : 133										
Office Sought:	Disbursement For: 2012	Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input checked="" type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House		<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Compumail		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>17</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		17		2012
M M	/	D D	/	Y Y Y Y								
02		17		2012								
Mailing Address 298 Captain Lewis Dr.		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Southington</td> <td>CT</td> <td>06489</td> </tr> </table>			City	State	Zip Code	Southington	CT	06489				
City	State	Zip Code										
Southington	CT	06489										
Purpose of Disbursement mailing and printing		<table border="1"> <tr> <td>1166.74</td> </tr> </table>	1166.74									
1166.74												
Candidate Name		Transaction ID : 33										
Office Sought:	Disbursement For: 2012	Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input checked="" type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House		<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Connecticut Light and Power		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>13</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		13		2012
M M	/	D D	/	Y Y Y Y								
02		13		2012								
Mailing Address P.O. Box 150493		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hartford</td> <td>CT</td> <td>06115</td> </tr> </table>			City	State	Zip Code	Hartford	CT	06115				
City	State	Zip Code										
Hartford	CT	06115										
Purpose of Disbursement electrical		<table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00									
200.00												
Candidate Name		Transaction ID : 23										
Office Sought:	Disbursement For: 2012	Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input checked="" type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House		<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	3254.86
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 86 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Connecticut Light and Power		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address P.O. Box 150493		Amount of Each Disbursement this Period 55.98 Transaction ID : 68B
City Hartford	State CT	
Zip Code 06115	Purpose of Disbursement Electrical - Utility	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address P.O. Box 371461		Amount of Each Disbursement this Period 22.85 Transaction ID : 70
City Pittsburg	State PA	
Zip Code 15122	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. FedEx Corp		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 371461		Amount of Each Disbursement this Period 105.92 Transaction ID : 54B
City Pittsburg	State PA	
Zip Code 15122	Purpose of Disbursement postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	184.75
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 87 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. IRS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>22</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		22		2012
M M	/	D D	/	Y Y Y Y								
02		22		2012								
Mailing Address		Amount of Each Disbursement this Period										
City	State	Zip Code										
Andover	MA	05501										
Purpose of Disbursement payroll withholding		<table border="1"> <tr> <td>661.41</td> </tr> </table>	661.41									
661.41												
Candidate Name		Transaction ID : 84										
Office Sought:	Disbursement For: 2012	Category/ Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)											
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. IRS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>22</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		22		2012
M M	/	D D	/	Y Y Y Y								
02		22		2012								
Mailing Address		Amount of Each Disbursement this Period										
City	State	Zip Code										
Andover	MA	05501										
Purpose of Disbursement payroll withholding		<table border="1"> <tr> <td>1221.69</td> </tr> </table>	1221.69									
1221.69												
Candidate Name		Transaction ID : 85										
Office Sought:	Disbursement For: 2012	Category/ Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)											
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. IRS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>07</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		07		2012
M M	/	D D	/	Y Y Y Y								
03		07		2012								
Mailing Address		Amount of Each Disbursement this Period										
City	State	Zip Code										
Andover	MA	05501										
Purpose of Disbursement payroll Withholding		<table border="1"> <tr> <td>661.41</td> </tr> </table>	661.41									
661.41												
Candidate Name		Transaction ID : 86										
Office Sought:	Disbursement For: 2012	Category/ Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)											
State:	District:											

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2544.51</td> </tr> </table>	2544.51
2544.51		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 88 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. IRS		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 661.41
City Andover	State MA	
Zip Code 05501		Transaction ID : 87
Purpose of Disbursement payroll withholding	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Litchfield County Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2012
Mailing Address		Amount of Each Disbursement this Period 3818.61
City	State	
Zip Code		Transaction ID : 130
Purpose of Disbursement Event Expense	Category/ Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Litchfield Inn		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 432 Bantam Road		Amount of Each Disbursement this Period 100.00
City Litchfield	State CT	
Zip Code 06759		Transaction ID : 17
Purpose of Disbursement Deposit room rental	Category/ Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4580.02
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 89 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Litchfield Inn		Date of Disbursement MM / DD / YYYY 02 / 11 / 2012
Mailing Address 432 Bantam Road		Amount of Each Disbursement this Period 388.40
City Litchfield	State CT Zip Code 06759	
Purpose of Disbursement Event Expense	Category/Type 007	Transaction ID : 21B
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Litchfield County Promotions		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address P.O. Box 177		Amount of Each Disbursement this Period 1769.29
City Thomaston	State CT Zip Code 06787-0177	
Purpose of Disbursement signs	Category/Type 006	Transaction ID : 53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Litchfield Hill Nursey		Date of Disbursement MM / DD / YYYY 03 / 23 / 2012
Mailing Address Torrington Road		Amount of Each Disbursement this Period 59.56
City Litchfield	State CT Zip Code 06795	
Purpose of Disbursement Event expense	Category/Type 007	Transaction ID : 64
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2217.25
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 90 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 5000.00
City FAIRFIELD	State CT	
Zip Code 06825	Purpose of Disbursement Fundraising Consultant Fee	Transaction ID : 10
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 422.01
City FAIRFIELD	State CT	
Zip Code 06825	Purpose of Disbursement Expense Reimbursement	Transaction ID : 14
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 7000.00
City FAIRFIELD	State CT	
Zip Code 06825	Purpose of Disbursement Fundraising Consultant Fee	Transaction ID : 24
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12422.01
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 91 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 7000.00
City FAIRFIELD State CT Zip Code 06825	Purpose of Disbursement Fundraising Consultant Category/Type 003	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

Transaction ID : 56

Full Name (Last, First, Middle Initial) B. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 38.23
City FAIRFIELD State CT Zip Code 06825	Purpose of Disbursement reimburse expense Category/Type 003	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

Transaction ID : 8

Full Name (Last, First, Middle Initial) c. PierceZappi		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 109.63
City FAIRFIELD State CT Zip Code 06825	Purpose of Disbursement Reimburse expense Category/Type 003	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

Transaction ID : 9

SUBTOTAL of Disbursements This Page (optional).....	7147.86
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 92 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2012
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 34.88
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	003 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 168.97
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	003 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 248.64
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement Credit card fee	003 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	452.64
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 93 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Sir Speedy		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 345.56 Transaction ID : 24B
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement Printing Service	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sir Speedy		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 844.65 Transaction ID : 26
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement printing Service	Category/ Type 006
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) c. Sir Speedy		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 1185.23 Transaction ID : 27
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement Printing Service	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2375.44
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 94 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Sir Speedy		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 86.48
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement printing Service	Transaction ID : 28
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sir Speedy		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 113.86
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement Printing Service	Transaction ID : 29
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sir Speedy		Date of Disbursement MM / DD / YYYY 03 / 05 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 1265.56
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement Printing Service	Transaction ID : 49B
Candidate Name	Category/Type 006	
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).....	1465.90
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 95 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Sir Speedy		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 3166.88
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement printing	Transaction ID : 57
Candidate Name	006 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. Sir Speedy		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 3116.87
City THOMASTON	State CT	
Zip Code 06787	Purpose of Disbursement printing	Transaction ID : 69
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 105.25
City Torrington	State CT	
Zip Code 06790	Purpose of Disbursement Office Supplies	Transaction ID : 32
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6389.00
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 96 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 305.48
City Torrington State CT Zip Code 06790	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : 38

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 29.84
City Torrington State CT Zip Code 06790	Purpose of Disbursement office supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 55

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 03 / 19 / 2012
Mailing Address 15 South Main Street		Amount of Each Disbursement this Period 221.46
City Torrington State CT Zip Code 06790	Purpose of Disbursement Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : 60

SUBTOTAL of Disbursements This Page (optional).....	556.78
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 97 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial)
A. Stop & Shop

Mailing Address 211 High Street

City Torrington State CT Zip Code 06790

Purpose of Disbursement Event Expense Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 03 / 23 / 2012

Amount of Each Disbursement this Period 182.99

Transaction ID : 63

Full Name (Last, First, Middle Initial)
B. Stop & Shop

Mailing Address 211 High Street

City Torrington State CT Zip Code 06790

Purpose of Disbursement event Expense Category/Type 007

Candidate Name

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

State: District:

Date of Disbursement 03 / 30 / 2012

Amount of Each Disbursement this Period 53.16

Transaction ID : 65

Full Name (Last, First, Middle Initial)
c. Strategic Media Group

Mailing Address 1210 North Taft Street Suite 701

City Arlington State VA Zip Code 22201

Purpose of Disbursement Media Consultant Category/Type

Candidate Name

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

State: District:

Date of Disbursement 01 / 04 / 2012

Amount of Each Disbursement this Period 3450.48

Transaction ID : 7

SUBTOTAL of Disbursements This Page (optional)..... 3686.63

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 98 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Tanganrone & Prelli			Date of Disbursement MM / DD / YYYY 02 / 14 / 2012
Mailing Address 19 Rowley Street			Amount of Each Disbursement this Period 433.00 Transaction ID : 31
City Winsted	State CT	Zip Code 06098	
Purpose of Disbursement Insurance rental		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Tanganrone & Prelli			Date of Disbursement MM / DD / YYYY 02 / 02 / 2012
Mailing Address 19 Rowley Street			Amount of Each Disbursement this Period 100.00 Transaction ID : 90
City Winsted	State CT	Zip Code 06098	
Purpose of Disbursement insurance Rental		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) c. Taylor Rental			Date of Disbursement MM / DD / YYYY 03 / 23 / 2012
Mailing Address 696 Winsted Road			Amount of Each Disbursement this Period 27.65 Transaction ID : 64B
City Torrington	State CT	Zip Code 06790	
Purpose of Disbursement Event Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	560.65
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 99 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Taylor Rental		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012
Mailing Address 696 Winsted Road		Amount of Each Disbursement this Period 163.78
City Torrington State CT Zip Code 06790	Purpose of Disbursement equipment rental 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 65B
State: District:		

Full Name (Last, First, Middle Initial) B. The Main Street American Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 2004		Amount of Each Disbursement this Period 400.00
City Keene State NH Zip Code 03431	Purpose of Disbursement insurance liability 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 46
State: District:		

Full Name (Last, First, Middle Initial) c. The Hartford Insurance		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address P.O. Box 8500-3690		Amount of Each Disbursement this Period 16.00
City Pittsburgh State PA Zip Code 19106	Purpose of Disbursement Insurance payment 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Transaction ID : 67
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	579.78
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 100 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Torrington Downtown Partners		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 53 Main Street		Amount of Each Disbursement this Period 985.00 Transaction ID : 15
City Torrington State CT Zip Code 06079	Purpose of Disbursement rent security deposit 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Torrington Downtown Partners		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 53 Main Street		Amount of Each Disbursement this Period 985.00 Transaction ID : 16
City Torrington State CT Zip Code 06079	Purpose of Disbursement rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Torrington Downtown Partners		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 53 Main Street		Amount of Each Disbursement this Period 985.00 Transaction ID : 41
City Torrington State CT Zip Code 06079	Purpose of Disbursement rent 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	2955.00
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 101 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Torrington Savings Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 129 MAIN STREET		Amount of Each Disbursement this Period 15.00 Transaction ID : 71
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement Return check fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. US Postmaster - Torrington		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2012
Mailing Address 185 East Elm Street		Amount of Each Disbursement this Period 880.00 Transaction ID : 20
City Torrington	State CT	
Zip Code 06790	Purpose of Disbursement stamps	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. US Postmaster Torrington		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 185 East Elm Street		Amount of Each Disbursement this Period 803.00 Transaction ID : 40
City Torrington	State CT	
Zip Code 06790	Purpose of Disbursement stamps/postage	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	1698.00
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 102 OF 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. US Postmaster Torrington		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012
Mailing Address 185 East Elm Street		Amount of Each Disbursement this Period 585.00
City Torrington	State CT Zip Code 06790	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : 58
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. US Postmaster Torrington		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2012
Mailing Address 185 East Elm Street		Amount of Each Disbursement this Period 450.00
City Torrington	State CT Zip Code 06790	
Purpose of Disbursement postage	Candidate Name	Transaction ID : 63B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. US Postmaster Torrington		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2012
Mailing Address 185 East Elm Street		Amount of Each Disbursement this Period 10.30
City Torrington	State CT Zip Code 06790	
Purpose of Disbursement postage	Candidate Name	Transaction ID : 63C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 003	

SUBTOTAL of Disbursements This Page (optional).....	1045.30
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 103 OF 105	
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. Vinny Pizza		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2012
Mailing Address 152 East Main Street		Amount of Each Disbursement this Period 160.50
City Torrington	State CT Zip Code 06790	
Purpose of Disbursement Event Expense	Category/Type 007	Transaction ID : 38B
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. West Street Grill		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 43 West Street		Amount of Each Disbursement this Period 2282.12
City Litchfield	State CT Zip Code 06759	
Purpose of Disbursement Event Expense	Category/Type 007	Transaction ID : 66B
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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	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:		

SUBTOTAL of Disbursements This Page (optional).....	2442.62
TOTAL This Period (last page this line number only).....	85778.76

**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 105			
	<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)
Roraback for Congress

Full Name (Last, First, Middle Initial) A. William A Fluty		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 727 Stone Church Road		Amount of Each Disbursement this Period 2500.00 Transaction ID : 100
City Wheeling	State WV	
Zip Code 26003-7452	Purpose of Disbursement Return check Bounce	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. William A Fluty		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 727 Stone Church Road		Amount of Each Disbursement this Period 2500.00 Transaction ID : 101
City Wheeling	State WV	
Zip Code 26003-7452	Purpose of Disbursement return bounce check	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. William A Fluty		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address 727 Stone Church Road		Amount of Each Disbursement this Period 2500.00 Transaction ID : 102
City Wheeling	State WV	
Zip Code 26003-7452	Purpose of Disbursement Return Bounce Check	Category/ Type 010
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).....	7500.00
TOTAL This Period (last page this line number only).....	7500.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Roraback for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PierceZappi		Nature of Debt (Purpose):
Mailing Address STE 108, 501 Kings HWY		
City State	Zip Code	
Fairfield CT	06825	

Outstanding Balance Beginning This Period	Transaction ID : DE113	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
26569.87	19569.87	7000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	7000.00
2) TOTALS This Period (last page this line number only)	7000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	7000.00