

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

JOE WALSH FOR CONGRESS COMMITTEE, INC.

ADDRESS (number and street) 830 W. ROUTE 22 -BOX 56

Check if different than previously reported. (ACC)

LAKE ZURICH

IL

60047

2. **FEC IDENTIFICATION NUMBER** ▼

C C00473579

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IL

08

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Helene M. Miller-Walsh

Signature of Treasurer Helene M. Miller-Walsh

[Electronically Filed]

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	141836.64	945024.84
(b) Total Contribution Refunds (from Line 20(d)) .....	700.00	13550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	141136.64	931474.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	149449.93	492835.93
(b) Total Offsets to Operating Expenditures (from Line 14).....	5011.58	17942.08
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	144438.35	474893.85
8. Cash on Hand at Close of Reporting Period (from Line 27).....	460437.51	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	60614.64	

**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

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	78561.00	569805.00
(ii) Unitemized.....	8175.64	59935.46
(iii) TOTAL of contributions from individuals ▶	86736.64	629740.46
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	55100.00	310284.38
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	141836.64	945024.84
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	19378.01
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.) .....	5011.58	17942.08
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	31.44	7331.44
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	146879.66	989676.37

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	149449.93	492835.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	21300.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	21300.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	700.00	11150.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	700.00	13550.00
21. OTHER DISBURSEMENTS .....	2350.00	4771.70
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	152499.93	532457.63

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	466057.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	146879.66
25. SUBTOTAL (add Line 23 and Line 24).....	612937.44
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	152499.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	460437.51

**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 116
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Harold Aganos</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 4613 Forest Way Cir		<b>Transaction ID : SA11AI.20143</b>
City State Zip Code Long Grove IL 60047	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	Amount of Each Receipt this Period 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Alger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2011
Mailing Address 7452 Foxfire Dr		<b>Transaction ID : SA11AI.20144</b>
City State Zip Code Crystal Lake IL 60012	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation NA Housewife	Amount of Each Receipt this Period 300.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Alger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 22 / 2011
Mailing Address 7452 Foxfire Dr		<b>Transaction ID : SA11AI.20145</b>
City State Zip Code Crystal Lake IL 60012	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation NA Housewife	Amount of Each Receipt this Period 450.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Mary Alger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011
Mailing Address 7452 Foxfire Dr		<b>Transaction ID : SA11AI.20146</b>
City Crystal Lake	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NA	Occupation Housewife	Election Cycle-to-Date 550.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Diane Bishop</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 38837 N. Drexel Drive		<b>Transaction ID : SA11AI.20162</b>
City Antioch	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
Name of Employer Info Requested	Occupation Info Requested	Election Cycle-to-Date 580.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Diane Bishop</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 38837 N. Drexel Drive		<b>Transaction ID : SA11AI.20163</b>
City Antioch	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Info Requested	Occupation Info Requested	Election Cycle-to-Date 660.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	460.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 19 E Harbor Dr

City Lake Zurich State IL Zip Code 60047

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

Name of Employer United Airlines Occupation NA

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  
 11 / 14 / 2011

**Transaction ID : SA11AI.20164**

Amount of Each Receipt this Period  
**40.00**

**B.** Full Name (Last, First, Middle Initial)  
**Claudia Beth Brandon**

Mailing Address 532 Terra Springs Cir

City Volo State IL Zip Code 60020

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

Name of Employer GE Healthcare Occupation Technical Writer

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  
 11 / 14 / 2011

**Transaction ID : SA11AI.20167**

Amount of Each Receipt this Period  
**40.00**

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

Mailing Address 1205 Santa Rosa Ave

City Wheaton State IL Zip Code 60187

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

Name of Employer Info Requested Occupation Info Requested

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  
 12 / 31 / 2011

**Transaction ID : SA11AI.20175**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2580.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Bonga Bruce</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 1205 Santa Rosa Ave		<b>Transaction ID : SA11AI.20176</b>	
City Wheaton	State IL	Zip Code 60187	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6500.00	
Name of Employer Info Requested	Occupation Info Requested	Reattribution Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9000.00		

Full Name (Last, First, Middle Initial) <b>B. Christopher Carney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 19 Wynstone Way		<b>Transaction ID : SA11AI.20190</b>	
City North Barrington	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00	
Name of Employer Info Requested	Occupation Info Requested	Reattribution Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Scott Carr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2011	
Mailing Address 1475 E Woodfield Rd. Suite 900		<b>Transaction ID : SA11AI.20192</b>	
City Schaumburg	State IL	Zip Code 60173	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Info Requested Northwestern Mutual	Occupation Info Requested Insurance	Reattribution Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11750.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Keith Carroll</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2011	
Mailing Address 21952 Pine Lake Cir		<b>Transaction ID : SA11AI.20193</b>	
City Kildeer	State IL	Zip Code 60047	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RJ Products	Occupation Business		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>B. Philip Christopher</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 01 / 2011	
Mailing Address 108 Fairway View Drive		<b>Transaction ID : SA11AI.20201</b>	
City Commack	State NY	Zip Code 11725	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer PCD	Occupation President & Ceo		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Phillip Cohen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011	
Mailing Address 1500 Ocean Drive Apt 903		<b>Transaction ID : SA11AI.20206</b>	
City Miami Beach	State FL	Zip Code 33139	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sean Colgan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 1001 Harbor Dr.		<b>Transaction ID : SA11AI.20209</b>
City Delray Beach	State FL	
Zip Code 33483		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer International Materials Inc	Occupation CEO	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Scott Dann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2011
Mailing Address 15668 Guerin Rd		<b>Transaction ID : SA11AI.20218</b>
City Libertyville	State IL	
Zip Code 60048		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mesirow Financial	Occupation Executive	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. John Dudek</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2011
Mailing Address 25159 N. Abbey Glenn		<b>Transaction ID : SA11AI.20236</b>
City Hawthorn Woods	State IL	
Zip Code 60047		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer LKCS	Occupation sales	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 116  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 9999 Collins Ave  
Apt 3a

City State Zip Code  
Bal Harbour FL 33154

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : SA11AI.20244**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nilly Falic**

Mailing Address 9999 Collins Ave  
Apt 3a

City State Zip Code  
Bal Harbour FL 33154

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : SA11AI.20246**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 266 Steeplechase Road

City State Zip Code  
Barrington Hills IL 60010

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

Name of Employer Info Requested Occupation Info Requested  
Midwest Printed Circuit Services, Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.20248**

Amount of Each Receipt this Period  
 500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 24000 W Erhart Rd.

City State Zip Code  
Grayslake IL 60030

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

Name of Employer Occupation  
Platinum mortgage President

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  
 12 / 13 / 2011

**Transaction ID : SA11AI.20266**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Grant Gier**

Mailing Address 25447 Abbey Glen Drive

City State Zip Code  
Hawthorn Woods IL 60047

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

Name of Employer Occupation  
Northwestern Mutual Financial Advisor

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  
 10 / 13 / 2011

**Transaction ID : SA11AI.20267**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Roman G Golash**

Mailing Address 418 E Juniper Dr

City State Zip Code  
Palatine IL 60074

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

Name of Employer Occupation  
US Army Microbiologist

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  
 12 / 06 / 2011

**Transaction ID : SA11AI.20272**

Amount of Each Receipt this Period  
50.00

**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 13 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 2494 S. Ocean Blvd.

City Boca Raton State FL Zip Code 33432

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

Name of Employer Self Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 22 / 2011

**Transaction ID : SA11AI.20274**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Greenhill**

Mailing Address 15423 W Little Saint Mary's Rd.

City Libertyville State IL Zip Code 60048

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

Name of Employer Smalley Stell Ring Co. Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : SA11AI.20275**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 153 Sheridan Rd

City Winnetka State IL Zip Code 60093

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

Name of Employer none Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : SA11AI.20277**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 30 Riparian Rd

City Highland park State IL Zip Code 60035

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

Name of Employer Smalley Steel Ring Co. Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : SA11AI.20279**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dean Gustafson**

Mailing Address 1450 Greene ST.  
Apt 311

City Augusta State GA Zip Code 30901

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

Name of Employer Self Occupation ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : SA11AI.20285**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kim L Harmon**

Mailing Address PO Box 7532

City Gurnee State IL Zip Code 60031

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

Name of Employer NA Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2011

**Transaction ID : SA11AI.20290**

Amount of Each Receipt this Period  
 100.00

**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 15 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>Kim L Harmon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address PO Box 7532		<b>Transaction ID : SA11AI.20291</b>
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer NA	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) <b>Kim L Harmon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address PO Box 7532		<b>Transaction ID : SA11AI.20292</b>
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NA	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

Full Name (Last, First, Middle Initial) <b>Harry Hoopis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2011
Mailing Address 5215 Old Orchard Road, Suite 1200		<b>Transaction ID : SA11AI.20307</b>
City Skokie	State IL	Zip Code 60077
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Northwestern Mutual	Occupation Managing Partner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. George Karas</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2011
Mailing Address 14N539 Frontenac		<b>Transaction ID : SA11AI.20322</b>
City West Dundee	State IL	
Zip Code 60118		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Village Squire Restaurants	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>B. Gary Karch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 22 / 2011
Mailing Address 20165 NE 39th PL Apt 302		<b>Transaction ID : SA11AI.20324</b>
City Aventura	State FL	
Zip Code 33180		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. James Kirth</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 20390 Park Hill Dr.		<b>Transaction ID : SA11AI.20327</b>
City Deer Park	State IL	
Zip Code 60010		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer menards	Occupation sales	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Walter Kleiner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 22 / 2011	
Mailing Address 1725- 89th Place NE		<b>Transaction ID : SA11AI.20332</b>	
City Clyde Hill	State WA	Zip Code 98004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>B. John H Knoll</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011	
Mailing Address 421 N. Valley Hill Rd		<b>Transaction ID : SA11AI.20334</b>	
City Bull Valley	State IL	Zip Code 60142	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) <b>C. John H Knoll</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2011	
Mailing Address 421 N. Valley Hill Rd		<b>Transaction ID : SA11AI.20335</b>	
City Bull Valley	State IL	Zip Code 60142	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	875.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**John H Knoll**

Mailing Address 421 N. Valley Hill Rd

City State Zip Code  
Bull Valley IL 60142

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

Name of Employer Occupation  
Retired Retired

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  
**12 / 31 / 2011**

**Transaction ID : SA11AI.20336**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Tom Kosanda**

Mailing Address 3550 Jeremy Ranch

City State Zip Code  
naperville IL 60564

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

Name of Employer Occupation  
Self sales

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  
**10 / 12 / 2011**

**Transaction ID : SA11AI.20341**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 25130 Cayuga Trail

City State Zip Code  
Lake Barrington IL 60010

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

Name of Employer Occupation  
Abrasive Form Inc Mfr

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  
**12 / 01 / 2011**

**Transaction ID : SA11AI.20346**

Amount of Each Receipt this Period  
**250.00**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 1219 Barclay Circle

City Inverness State IL Zip Code 60010

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : SA11AI.20373**

Amount of Each Receipt this Period  
 1400.00

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

Mailing Address 1401 Rodenburg Rd.

City Schaumburg State IL Zip Code 60193

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

Name of Employer Info Requested Occupation Info Requested  
 McWilliams Electric Co electrical contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.20385**

Amount of Each Receipt this Period  
 2300.00

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

Mailing Address 1401 Rodenburg Rd.

City Schaumburg State IL Zip Code 60193

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

Name of Employer Info Requested Occupation Info Requested  
 McWilliams Electric Co electrical contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.21059**

Amount of Each Receipt this Period  
 200.00

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

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

3900.00

**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 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 28729 N Harrison Ave

City Wauconda State IL Zip Code 60084

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

Name of Employer Self Occupation Horseshoer

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  
 12 / 29 / 2011

**Transaction ID : SA11AI.20388**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 8787 Bay Colony Drive

City Naples, FL State IL Zip Code 34108

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 **500.00**

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

**Transaction ID : SA11AI.20394**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Miles G. Moore**

Mailing Address 1475 E. Woodfield Rd.

City Schaumburg State IL Zip Code 60173

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

Name of Employer Northwestern Mutual 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  
 10 / 17 / 2011

**Transaction ID : SA11AI.20406**

Amount of Each Receipt this Period  
**250.00**

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Cherna Moskowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011
Mailing Address 21520 Pioneer Blvd Ste 205		<b>Transaction ID : SA11AI.20410</b>
City Hawaiian Gardens State CA Zip Code 90716	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Irving Moskowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011
Mailing Address 21520 Pioneer Blvd Ste 205		<b>Transaction ID : SA11AI.20412</b>
City Hawaiian Gardens State CA Zip Code 90716	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Info Requested	Occupation Info Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Margaret E Mulhall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 12602 Wedgemere Dr		<b>Transaction ID : SA11AI.20416</b>
City Huntley State IL Zip Code 60142	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Not Applicable	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Paul Narang</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2011
Mailing Address 23689 W. Petite Lake Road		<b>Transaction ID : SA11AI.20421</b>
City State Zip Code Lake Villa IL 60046	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Blue Cross Blue Shield Association Information Technology	Amount of Each Receipt this Period 400.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Paul Narang</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 23689 W. Petite Lake Road		<b>Transaction ID : SA11AI.20422</b>
City State Zip Code Lake Villa IL 60046	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Blue Cross Blue Shield Association Information Technology	Amount of Each Receipt this Period 440.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 440.00	

Full Name (Last, First, Middle Initial) <b>C. Jean Neumann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address 1027 Pembridge Place		<b>Transaction ID : SA11AI.20424</b>
City State Zip Code Sugar Grove IL 60554	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Greenscape Ventures, LLC Executive	Amount of Each Receipt this Period 2500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2640.00
<b>TOTAL</b> This Period (last page this line number only).....	2640.00

**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 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Jean Neumann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address 1027 Pembridge Place		<b>Transaction ID : SA11AI.21060</b>
City State Zip Code Sugar Grove IL 60554	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Greenscape Ventures, LLC Executive	Amount of Each Receipt this Period 5000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth Neumann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address 4355 Weaver Parkway		<b>Transaction ID : SA11AI.20426</b>
City State Zip Code Warrenville, IL 60555	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Greenscape Ventures, LLC CEO	Amount of Each Receipt this Period 2500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Kenneth Neumann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address 4355 Weaver Parkway		<b>Transaction ID : SA11AI.21061</b>
City State Zip Code Warrenville, IL 60555	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Greenscape Ventures, LLC CEO	Amount of Each Receipt this Period 5000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 116	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Matt Neumann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address W329 N6260 Robin Lane		<b>Transaction ID : SA11AI.20428</b>
City Nashotah	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Neumann Companies, Inc.	Occupation Real Estate	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Walter Nielsen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address 546 Timber Lane		<b>Transaction ID : SA11AI.20431</b>
City Lake Forest	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. George R. Nowak</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 112 Schreiber		<b>Transaction ID : SA11AI.20435</b>
City Roselle	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2950.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Mary Louise Obenaus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2011
Mailing Address 36347 N Tara Ct		<b>Transaction ID : SA11AI.20439</b>
City Ingleside	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Louise Obenaus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011
Mailing Address 36347 N Tara Ct		<b>Transaction ID : SA11AI.20437</b>
City Ingleside	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Louise Obenaus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 36347 N Tara Ct		<b>Transaction ID : SA11AI.20438</b>
City Ingleside	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Richard Parrillo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011
Mailing Address 1313 NW 167th Street		<b>Transaction ID : SA11AI.20451</b>
City State Zip Code Miami Gardens FL 33169	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer United Automobile Insurance Co	Occupation CEO	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. John Prunskis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 431 Summit St		<b>Transaction ID : SA11AI.20465</b>
City State Zip Code Elgin IL 60120	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 390.00
Name of Employer IL Pain Institute	Occupation Doctor	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 390.00	

Full Name (Last, First, Middle Initial) <b>C. Anthony Pugliese III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 22 / 2011
Mailing Address 101 Pugliese's Way Suite 200		<b>Transaction ID : SA11AI.20467</b>
City State Zip Code Delray Beach FL 33444	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer The Pugliese Co.	Occupation real estate developer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5040.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. John C. Regner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2011	
Mailing Address 2616 N. Bayview Lane		<b>Transaction ID : SA11AI.20477</b>	
City McHenry	State IL	Zip Code 60051	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. John Roe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 611 South Wells Street #2103		<b>Transaction ID : SA11AI.20485</b>	
City Chicago	State IL	Zip Code 60607	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer BTR Trading Group	Occupation Futures Trader		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Jeff Schroeder</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011	
Mailing Address 787 Brookfield Ct		<b>Transaction ID : SA11AI.20492</b>	
City Lake Zurich	State IL	Zip Code 60047	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00	
Name of Employer Prince Castle	Occupation Elec Engineer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 340.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1140.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Stanley J Stack Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011
Mailing Address 389 N Valley Ct		<b>Transaction ID : SA11AI.20519</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>B. Stanley J Stack Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 389 N Valley Ct		<b>Transaction ID : SA11AI.20520</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) <b>C. Norval B Stephens</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2011
Mailing Address 3400 Garlands Lane		<b>Transaction ID : SA11AI.20527</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 975.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address 1253 Berkshire Lane

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Financial Advisor Northwestern Mutual

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  
10 / 13 / 2011

**Transaction ID : SA11AI.20532**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 23765 N Echo Lake Rd

City State Zip Code  
Lake Zurich IL 60047

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

Name of Employer Occupation  
Retired 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  
12 / 29 / 2011

**Transaction ID : SA11AI.20535**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 640 N. Island Dr

City State Zip Code  
Golden Beach FL 33160

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

Name of Employer Occupation  
Info Requested Info Requested

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  
12 / 31 / 2011

**Transaction ID : SA11AI.20538**

Amount of Each Receipt this Period  
500.00

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

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

2750.00

**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 30 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Lee E Tenzer**

Mailing Address 81 Seagate Dr.  
Ubit 1903

City Naples State FL Zip Code 34103

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  
4400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11AI.20541**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve Theofanous**

Mailing Address 3903 Rockspur Trail

City Crystal Lake State IL Zip Code 60012

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

Name of Employer Around the Clock Rest & Bakery 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  
 10 / 24 / 2011

**Transaction ID : SA11AI.20543**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4773 R.F.D.

City Long Grove State IL Zip Code 60047

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

Name of Employer Don-Food Distributor Occupation Prinova

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  
 10 / 13 / 2011

**Transaction ID : SA11AI.20547**

Amount of Each Receipt this Period  
1000.00

**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: (check only one)	PAGE 31 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sam Valadez</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2011	
Mailing Address 2611 Fieldcrest Dr.		<b>Transaction ID : SA11AI.20561</b>	
City Mundelein	State IL	Zip Code 60060	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Info Requested	Occupation Info Requested		Amount of Each Receipt this Period _____ 1000.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Vinesh R. Virani</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011	
Mailing Address 346 W. Bristol Ct.		<b>Transaction ID : SA11AI.20562</b>	
City Bloomingtondale	State IL	Zip Code 60108	Amount of Each Receipt this Period _____ 251.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Info Requested	Occupation Info Requested		Amount of Each Receipt this Period _____ 751.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 751.00		

Full Name (Last, First, Middle Initial) <b>C. Robert Walsh</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011	
Mailing Address 926 SW 38th Court		<b>Transaction ID : SA11AI.20570</b>	
City Boynton Beach	State FL	Zip Code 33435	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Info Requested Cobb Inc.	Occupation Info Requested President		Amount of Each Receipt this Period _____ 1000.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2251.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 116
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Mark Warren</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011	
Mailing Address 815 NE Bay Isle Dr		<b>Transaction ID : SA11AI.20574</b>	
City Boca Raton	State FL	Zip Code 33487	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer International Materials Inc	Occupation Marketing		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Dolores Williams</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 10 / 2011	
Mailing Address Po Box 1296		<b>Transaction ID : SA11AI.20583</b>	
City Festus	State MO	Zip Code 63028	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 550.00		

Full Name (Last, First, Middle Initial) <b>C. Jeffrey Zipper</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 5365 W. Atlantic Ave		<b>Transaction ID : SA11AI.20595</b>	
City Delray Beach	State FL	Zip Code 33484	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer National Pain Institute	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 3000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____ 78561.00



**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 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**ALLIES FOR ISRAEL POLITICAL ACTION COMMITTEE**

Mailing Address 1901 PENNSYLVANIA AVE NW SUITE 901

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00503250

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 27 / 2011

**Transaction ID : SA11C.21030**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN PRINCIPLES**

Mailing Address 20533 BISCAYNE BLVD #250

City MIAMI State FL Zip Code 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : SA11C.21026**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. Akard Street Suite 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : SA11C.21024**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

**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 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**BECAUSE I CARE POLITICAL ACTION COMMITTEE (BICPAC)**

Mailing Address 2494 S . OCEAN BLVD. #M-1

City BOCA RATON State FL Zip Code 33432

FEC ID number of contributing federal political committee. **C C00381624**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2011

**Transaction ID : SA11C.21022**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**BUDGETHAWKS.COM**

Mailing Address 22780 INDIAN CREEK DR.  
STE 100

City DULLES State VA Zip Code 20166

FEC ID number of contributing federal political committee. **C C00491183**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2011

**Transaction ID : SA11C.21019**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00029504**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2011

**Transaction ID : SA11C.21028**

Amount of Each Receipt this Period  
 5000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 116  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address 25 EAST MAIN STREET, SUITE 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2011

**Transaction ID : SA11C.21042**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 17634.38

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : SA11C.21021**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JIM JORDAN FOR CONGRESS**

Mailing Address 1709 STATE ROUTE 560 SOUTH

City Urbana State OH Zip Code 43078

FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer Occupation

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  
 12 / 20 / 2011

**Transaction ID : SA11C.21025**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

**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 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**JIM JORDAN FOR CONGRESS**

Mailing Address 1709 STATE ROUTE 560 SOUTH

City URBANA State OH Zip Code 43078

FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : SA11C.21058**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JOBS, ECONOMY AND BUDGET FUND (JEB FUND)**

Mailing Address 7315 Wisconsin Avenue  
Suite 310 East

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

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  
 12 / 27 / 2011

**Transaction ID : SA11C.21032**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN S FUND**

Mailing Address PO BOX 853

City EDWARDSVILLE State IL Zip Code 62025

FEC ID number of contributing federal political committee. **C** C00390831

Name of Employer Occupation

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  
 12 / 29 / 2011

**Transaction ID : SA11C.21043**

Amount of Each Receipt this Period  
5000.00

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

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

8500.00

**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 37 OF 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN S FUND**

Mailing Address **PO BOX 853**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C C00390831**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**11000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 29 / 2011**

**Transaction ID : SA11C.21044**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address **600 14TH STREET, NW SUITE 800**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 29 / 2011**

**Transaction ID : SA11C.21040**

Amount of Each Receipt this Period  
**2500.00**

2010 General Election Debt

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

Mailing Address **3701 CONNECTICUT AVE #404**

City **WASHINGTON** State **DC** Zip Code **20008**

FEC ID number of contributing federal political committee. **C C00491241**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2011**

**Transaction ID : SA11C.21047**

Amount of Each Receipt this Period  
**2500.00**

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

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

**10000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>LINCOLN PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 3701 CONNECTICUT AVE #404		<b>Transaction ID : SA11C.21048</b>	
City WASHINGTON	State DC	Zip Code 20008	
FEC ID number of contributing federal political committee. <b>C C00491241</b>		Amount of Each Receipt this Period 2600.00	
Name of Employer Occupation		2010 General Election Debt	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 11000.00	

Full Name (Last, First, Middle Initial) MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 1295 STATE STREET		<b>Transaction ID : SA11C.21049</b>	
City SPRINGFIELD	State MA	Zip Code 01111	
FEC ID number of contributing federal political committee. <b>C C00118943</b>		Amount of Each Receipt this Period 2000.00	
Name of Employer Occupation		2010 General Election Debt	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>NEW PIONEERS PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011	
Mailing Address 228 S WASHINGTON ST STE 115		<b>Transaction ID : SA11C.21033</b>	
City ALEXANDRIA	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee. <b>C C00459123</b>		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		2010 General Election Debt	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	5600.00

**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 116
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH (PETE PAC)**

Mailing Address 7804 EVENING LANE

City State Zip Code  
ALEXANDRIA VA 22306

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

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  
 12 29 2011

**Transaction ID : SA11C.21037**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**PROSPERITY PAC**

Mailing Address 1006 PENDLETON STREET

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

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  
 12 27 2011

**Transaction ID : SA11C.21035**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**VOICE FOR FREEDOM**

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City State Zip Code  
ATLANTA GA 30339

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

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  
 12 31 2011

**Transaction ID : SA11C.21045**

Amount of Each Receipt this Period  
2000.00

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

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

12000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 116  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**VOLUNTEERS FOR SHIMKUS**

Mailing Address P.O. BOX 661  
PO BOX 5458

City State Zip Code  
COLLINSVILLE IL 62234

FEC ID number of contributing federal political committee. **C** C00258855

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 29 / 2011

**Transaction ID : SA11C.21039**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

55100.00



# 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 116	
(check only one)			
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

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

Mailing Address **2210 WOODLAWN PARK AVE.**

City **MCHENRY** State **IL** Zip Code **60051**

FEC ID number of contributing federal political committee. **C HO1L08090**

Name of Employer **US Government** Occupation **US Congressman**

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y Y
10		15		2011

**Transaction ID : SA14.21017**

Amount of Each Receipt this Period  
**5000.00**

Repayment of exp. reimb in error

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y Y
-------	---	-------	---	---------------

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y Y
-------	---	-------	---	---------------

Amount of Each Receipt this Period

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

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

**5000.00**

**5000.00**

**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 42 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. 111 Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011
Mailing Address 200 Applebee St.		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : SB17.20641</b>
City Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. After the Fox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 1406 Riverside Dr		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.20645</b>
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. After the Fox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 1406 Riverside Dr		Amount of Each Disbursement this Period 179.45 <b>Transaction ID : SB17.20646</b>
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement Volunteer Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	584.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. After the Fox</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 1406 Riverside Dr		Amount of Each Disbursement this Period 25.60 <b>Transaction ID : SB17.20647</b>
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AI Bus Service LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2011
Mailing Address 3542 W. Peterson		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.20649</b>
City Chicago	State IL	
Zip Code 60659	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 184.70 <b>Transaction ID : SB17.20650</b>
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	710.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 144.20
City Atlanta	State GA Zip Code 30349	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.20651
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 20.00
City Atlanta	State GA Zip Code 30349	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.20652
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 122.20
City Atlanta	State GA Zip Code 30349	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.20653
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	286.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 116			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 20.00
City Atlanta State GA Zip Code 30349	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20654</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 178.70
City Atlanta State GA Zip Code 30349	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20655</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 20.00
City Atlanta State GA Zip Code 30349	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20656</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	218.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 116	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 4255 Amon Carter Blvd MD2400		Amount of Each Disbursement this Period 147.70
City State Zip Code Fort Worth TX 75261	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20659</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 4255 Amon Carter Blvd MD2400		Amount of Each Disbursement this Period 147.70
City State Zip Code Fort Worth TX 75261	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20660</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 255.10
City State Zip Code Ft. Lauderdale FL 33336	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20661</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	550.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 116			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 4.95
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.20662
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 10.71
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.20663
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 4.95
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.20664
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 3.20 <b>Transaction ID : SB17.20665</b>
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Axiom Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1251 NW Briarcliff Pkwy, ste 85		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.20116</b>
City Kansas City	State MO	
Zip Code 64116	Purpose of Disbursement Strategic Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Axiom Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 1251 NW Briarcliff Pkwy, ste 85		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.20117</b>
City Kansas City	State MO	
Zip Code 64116	Purpose of Disbursement Strategic Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11003.20
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Axiom Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011		
Mailing Address 1251 NW Briarcliff Pkwy, ste 85			Amount of Each Disbursement this Period 1943.00		
City Kansas City	State MO	Zip Code 64116	Transaction ID : SB17.20118		
Purpose of Disbursement Direct Mail Production		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Best Buy</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011		
Mailing Address #1166			Amount of Each Disbursement this Period 55.62		
City McHenry	State IL	Zip Code 60050	Transaction ID : SB17.20674		
Purpose of Disbursement Telephone Service		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Bobbys Barrell Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011		
Mailing Address 35009 N. Gilmer Rd.			Amount of Each Disbursement this Period 80.97		
City Volo	State IL	Zip Code 60073	Transaction ID : SB17.20675		
Purpose of Disbursement Meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2079.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Brandt's Little Cafe</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011		
Mailing Address 807 W Baldwin			Amount of Each Disbursement this Period 180.54		
City Palatine	State IL	Zip Code 60067	Transaction ID : SB17.20684		
Purpose of Disbursement Volunteer Meals		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Chasen Bullock</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011		
Mailing Address 206 Calley de Madrid			Amount of Each Disbursement this Period 1489.10		
City Redondo Beach	State CA	Zip Code 90277	Transaction ID : SB17.20600		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Chasen Bullock</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011		
Mailing Address 206 Calley de Madrid			Amount of Each Disbursement this Period 1591.17		
City Redondo Beach	State CA	Zip Code 90277	Transaction ID : SB17.20601		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3260.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Chasen Bullock</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011	
Mailing Address 206 Calley de Madrid			Amount of Each Disbursement this Period 1591.17	
City Redondo Beach	State CA	Zip Code 90277	Transaction ID : SB17.20602	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Chasen Bullock</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011	
Mailing Address 206 Calley de Madrid			Amount of Each Disbursement this Period 1492.53	
City Redondo Beach	State CA	Zip Code 90277	Transaction ID : SB17.20603	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Chasen Bullock</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011	
Mailing Address 206 Calley de Madrid			Amount of Each Disbursement this Period 1591.17	
City Redondo Beach	State CA	Zip Code 90277	Transaction ID : SB17.20604	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4674.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Chasen Bullock</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 206 Calley de Madrid		Amount of Each Disbursement this Period 805.10 <b>Transaction ID : SB17.20605</b>
City Redondo Beach	State CA Zip Code 90277	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cabana Charleys</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 1470 Peace Rd #103		Amount of Each Disbursement this Period 719.17 <b>Transaction ID : SB17.20688</b>
City Sycamore	State IL Zip Code 60178	
Purpose of Disbursement Volunteer Meals	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cambria Audio</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 10322 Briar Forest Dr		Amount of Each Disbursement this Period 2655.00 <b>Transaction ID : SB17.20692</b>
City Houston	State TX Zip Code 77042	
Purpose of Disbursement Office Equipment	Candidate Name	Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4179.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Candos Insurance Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 8104 W119th St		Amount of Each Disbursement this Period 362.00 <b>Transaction ID : SB17.20694</b>
City Palos Park	State IL	
Zip Code 60464	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.20697</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 184.84 <b>Transaction ID : SB17.20698</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	596.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 142.38		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.20699		
Purpose of Disbursement Meeting-Meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 88.26		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.20700		
Purpose of Disbursement Meeting-Meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 18.17		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.20701		
Purpose of Disbursement Meeting-Meals		Category/ Type			
Candidate Name					
Office Sought:	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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	248.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 126.50 <b>Transaction ID : SB17.20702</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. David Carlin</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 25W306 Highview Dr		Amount of Each Disbursement this Period 716.25 <b>Transaction ID : SB17.20607</b>
City Naperville State IL Zip Code 60563	Purpose of Disbursement Fundraising Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Colonial Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 552 So Randall Rd		Amount of Each Disbursement this Period 249.70 <b>Transaction ID : SB17.20717</b>
City St Charles State IL Zip Code 60174	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1092.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address 2508 W Route 120		Amount of Each Disbursement this Period 878.57
City McHenry	State IL	
Zip Code 60051	Purpose of Disbursement Utilities	Transaction ID : SB17.20719
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 1601 Trapelo Rd., Ste329		Amount of Each Disbursement this Period 58.44
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Web Services	Transaction ID : SB17.20720
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 1601 Trapelo Rd., Ste329		Amount of Each Disbursement this Period 58.44
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Web Services	Transaction ID : SB17.20721
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	995.45
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 1601 Trapelo Rd., Ste329		Amount of Each Disbursement this Period 85.00
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Web Services	Transaction ID : SB17.20722
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Decker Consulting Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 244 14th Place NE #2		Amount of Each Disbursement this Period 1501.19
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.20120
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Docks Bar and Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 313 E. Liberty St		Amount of Each Disbursement this Period 41.66
City Wauconda	State IL	
Zip Code 60084	Purpose of Disbursement Meeting-Meals	Transaction ID : SB17.20732
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1627.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Docks Bar and Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address 313 E. Liberty St		Amount of Each Disbursement this Period 85.69
City Wauconda	State IL	
Zip Code 60084	Purpose of Disbursement Meeting-Meals	Transaction ID : SB17.20733
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42
City Algonquin	State IL	
Zip Code 60102	Purpose of Disbursement Salary	Transaction ID : SB17.20608
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42
City Algonquin	State IL	
Zip Code 60102	Purpose of Disbursement Salary	Transaction ID : SB17.20609
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2474.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.20610</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.20611</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.20612</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3583.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 2891.47
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : SB17.20613
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 5.30
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Shipping	Candidate Name	Transaction ID : SB17.20754
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 41.49
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Shipping	Candidate Name	Transaction ID : SB17.20755
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2938.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 10.30 <b>Transaction ID : SB17.20756</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 14.98 <b>Transaction ID : SB17.20757</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 109.84 <b>Transaction ID : SB17.20758</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	135.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 20.37
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20759</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 95.76
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20760</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. First Data</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period 145.20
City Coral Springs State FL Zip Code 33065	Purpose of Disbursement Online Processing Fees	
Candidate Name	Category/Type	<b>Transaction ID : SB17.20761</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	261.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. First Data		M M / D D / Y Y Y Y 10 / 04 / 2011	
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period	
City State Zip Code Coral Springs FL 33065		1.08	
Purpose of Disbursement Online Processing Fees		Transaction ID : SB17.20762	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. First Data		M M / D D / Y Y Y Y 11 / 04 / 2011	
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period	
City State Zip Code Coral Springs FL 33065		39.95	
Purpose of Disbursement Online Processing Fees		Transaction ID : SB17.20763	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. First Data		M M / D D / Y Y Y Y 11 / 04 / 2011	
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period	
City State Zip Code Coral Springs FL 33065		0.67	
Purpose of Disbursement Online Processing Fees		Transaction ID : SB17.20764	
Candidate Name		Category/Type	
Office Sought:	House Senate President	Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	41.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. First Data</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period 39.45 <b>Transaction ID : SB17.20765</b>
City Coral Springs	State FL	
Zip Code 33065	Purpose of Disbursement Online Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Data</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 4000 Coral Springs Dr		Amount of Each Disbursement this Period 0.56 <b>Transaction ID : SB17.20766</b>
City Coral Springs	State FL	
Zip Code 33065	Purpose of Disbursement Online Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 196.20 <b>Transaction ID : SB17.20773</b>
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	236.21
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address B-218 Longworth House Office		Amount of Each Disbursement this Period 336.32 <b>Transaction ID : SB17.20785</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement Donor Mementos	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Huckaby Davis Lisker, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 1659.25 <b>Transaction ID : SB17.20787</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Compliance Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Huckaby Davis Lisker, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 2209.75 <b>Transaction ID : SB17.20788</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Compliance Consulting	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4205.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 116			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. iDonate Pro</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011		
Mailing Address 2033 San Elijo Ave #203			Amount of Each Disbursement this Period 125.00		
City Cardiff by the Sea	State CA	Zip Code 92007	Transaction ID : SB17.20790		
Purpose of Disbursement Online Processing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. iDonate Pro</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011		
Mailing Address 2033 San Elijo Ave #203			Amount of Each Disbursement this Period 32.50		
City Cardiff by the Sea	State CA	Zip Code 92007	Transaction ID : SB17.20791		
Purpose of Disbursement Online Processing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. iDonate Pro</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011		
Mailing Address 2033 San Elijo Ave #203			Amount of Each Disbursement this Period 125.00		
City Cardiff by the Sea	State CA	Zip Code 92007	Transaction ID : SB17.20792		
Purpose of Disbursement Online Processing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	282.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. iDonate Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 2033 San Elijo Ave #203		Amount of Each Disbursement this Period 43.75
City Cardiff by the Sea	State CA	
Zip Code 92007	Purpose of Disbursement Online Processing	<b>Transaction ID : SB17.20793</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. iDonate Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 2033 San Elijo Ave #203		Amount of Each Disbursement this Period 125.00
City Cardiff by the Sea	State CA	
Zip Code 92007	Purpose of Disbursement Online Processing	<b>Transaction ID : SB17.20794</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. iDonate Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 2033 San Elijo Ave #203		Amount of Each Disbursement this Period 854.50
City Cardiff by the Sea	State CA	
Zip Code 92007	Purpose of Disbursement Online Processing	<b>Transaction ID : SB17.20795</b>
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1023.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.20797</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 166.66 <b>Transaction ID : SB17.20798</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 255.82 <b>Transaction ID : SB17.20799</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	572.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 262.49 <b>Transaction ID : SB17.20800</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 262.49 <b>Transaction ID : SB17.20801</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address P.O. Box 199447		Amount of Each Disbursement this Period 262.49 <b>Transaction ID : SB17.20802</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	787.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011		
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 648.83		
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB17.20805		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011		
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 819.50		
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB17.20806		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011		
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 1254.43		
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB17.20807		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2722.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address P.O. Box 804522		Amount of Each Disbursement this Period 1285.50 <b>Transaction ID : SB17.20808</b>
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address P.O. Box 804522		Amount of Each Disbursement this Period 1285.50 <b>Transaction ID : SB17.20809</b>
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address P.O. Box 804522		Amount of Each Disbursement this Period 1285.50 <b>Transaction ID : SB17.20810</b>
City Cincinnati	State OH Zip Code 45280	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3856.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Intuit QB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 13.76
City Mountain View	State CA Zip Code 94943	
Purpose of Disbursement Software	Candidate Name	Transaction ID : SB17.20811
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Intuit QB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 13.76
City Mountain View	State CA Zip Code 94943	
Purpose of Disbursement Software	Candidate Name	Transaction ID : SB17.20812
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Intuit QB</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 13.76
City Mountain View	State CA Zip Code 94943	
Purpose of Disbursement Software	Candidate Name	Transaction ID : SB17.20813
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	41.28
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Jamestown Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2011	
Mailing Address 5 Mapleton Rd, 300			Amount of Each Disbursement this Period 3650.00	
City Princeton	State NJ	Zip Code 08540	Transaction ID : SB17.20103	
Purpose of Disbursement Advertising		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Jersey's Pizza &amp; Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011	
Mailing Address 2360 Lakewood Blvd			Amount of Each Disbursement this Period 1421.65	
City Hoffman Estates	State IL	Zip Code 60192	Transaction ID : SB17.20815	
Purpose of Disbursement Event Catering		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Jersey's Pizza &amp; Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011	
Mailing Address 2360 Lakewood Blvd			Amount of Each Disbursement this Period 30.83	
City Hoffman Estates	State IL	Zip Code 60192	Transaction ID : SB17.20816	
Purpose of Disbursement Event Catering		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5102.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Jewel Food Store</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 885 E. Belvidere Rd.		Amount of Each Disbursement this Period 64.41 <b>Transaction ID : SB17.20817</b>
City Grayslake State IL Zip Code 60030	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jewel Food Store</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 885 E. Belvidere Rd.		Amount of Each Disbursement this Period 56.88 <b>Transaction ID : SB17.20818</b>
City Grayslake State IL Zip Code 60030	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jimmy Johns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address 5657 Northwest Hwy		Amount of Each Disbursement this Period 21.26 <b>Transaction ID : SB17.20823</b>
City Crystal Lake State IL Zip Code 60014	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	142.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. John Karas</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address 25528 Paddock Lane		Amount of Each Disbursement this Period 373.37 <b>Transaction ID : SB17.20616</b>
City Tower Lakes	State IL	
Zip Code 60010	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kmart</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address 6000 Northwest Hwy		Amount of Each Disbursement this Period 261.25 <b>Transaction ID : SB17.20827</b>
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Larry's Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 1131 N Lockport Rd		Amount of Each Disbursement this Period 327.89 <b>Transaction ID : SB17.20833</b>
City Plainfield	State IL	
Zip Code 60544	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	962.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Larry's Diner</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 1131 N Lockport Rd		Amount of Each Disbursement this Period 54.06
City Plainfield	State IL	
Zip Code 60544	Purpose of Disbursement Event Catering	Transaction ID : SB17.20834
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mailchimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 512 Means St. #404		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA	
Zip Code 30318	Purpose of Disbursement Web Services	Transaction ID : SB17.20837
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mailchimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 512 Means St. #404		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA	
Zip Code 30318	Purpose of Disbursement Web Services	Transaction ID : SB17.20838
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	154.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Mailchimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 512 Means St. #404		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.20839</b>
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Web Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. McGonigal's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 105 So Cook St		Amount of Each Disbursement this Period 276.80 <b>Transaction ID : SB17.20845</b>
City Barrington State IL Zip Code 60010	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. McGonigal's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 105 So Cook St		Amount of Each Disbursement this Period 115.00 <b>Transaction ID : SB17.20846</b>
City Barrington State IL Zip Code 60010	Purpose of Disbursement room rental	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	441.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Menards</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 1400 S US HWY 12		Amount of Each Disbursement this Period 51.59
City Fox Lake	State IL	
Zip Code 60020	Purpose of Disbursement parade supplies	Transaction ID : SB17.20851
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael J Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address P.O. Box 363		Amount of Each Disbursement this Period 785.19
City Barrington	State IL	
Zip Code 60011	Purpose of Disbursement Event Catering/Site Rental	Transaction ID : SB17.20623
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Helene M. Miller-Walsh</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 2210 Woodlawn Park Ave.		Amount of Each Disbursement this Period 91.00
City McHenry	State IL	
Zip Code 60051	Purpose of Disbursement Travel	Transaction ID : SB17.20625
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	927.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Helene M. Miller-Walsh</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011		
Mailing Address 2210 Woodlawn Park Ave.			Amount of Each Disbursement this Period 53.00		
City McHenry	State IL	Zip Code 60051	Transaction ID : SB17.20626		
Purpose of Disbursement Travel		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Mulligan's Saloon</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011		
Mailing Address 2616 Schaid Cr			Amount of Each Disbursement this Period 65.23		
City McHenry	State IL	Zip Code 60051	Transaction ID : SB17.20856		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Andrew Nelms</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011		
Mailing Address 32853 Pleasant Hill Rd			Amount of Each Disbursement this Period 1056.83		
City Genoa	State IL	Zip Code 60135	Transaction ID : SB17.20627		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1175.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.20628</b>
City Genoa	State IL	
Zip Code 60135	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 1587.17 <b>Transaction ID : SB17.20629</b>
City Genoa	State IL	
Zip Code 60135	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 179.83 <b>Transaction ID : SB17.20630</b>
City Genoa	State IL	
Zip Code 60135	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1792.00
<b>TOTAL</b> This Period (last page this line number only).....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 1587.17 <b>Transaction ID : SB17.20631</b>
City Genoa	State IL	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 1587.17 <b>Transaction ID : SB17.20632</b>
City Genoa	State IL	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 1587.17 <b>Transaction ID : SB17.20633</b>
City Genoa	State IL	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4761.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 1587.17
City Genoa	State IL	
Zip Code 60135	Purpose of Disbursement Salary	Transaction ID : SB17.20634
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 2722 Green Bay Road		Amount of Each Disbursement this Period 182.30
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Office Supplies	Transaction ID : SB17.20865
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address 5507 W Touhy Ave		Amount of Each Disbursement this Period 95.74
City Skokie	State IL	
Zip Code 60077	Purpose of Disbursement Office Supplies	Transaction ID : SB17.20867
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1865.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 5507 W Touhy Ave		Amount of Each Disbursement this Period 29.01
City Skokie State IL Zip Code 60077	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : SB17.20868
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 5507 W Touhy Ave		Amount of Each Disbursement this Period 708.38
City Skokie State IL Zip Code 60077	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : SB17.20869
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 4429 US Route 14		Amount of Each Disbursement this Period 351.76
City Crystal Lake State IL Zip Code 60014	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : SB17.20871
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1089.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Party City</b>		Date of Disbursement
Mailing Address 5561 Northwest Hwy		M M / D D / Y Y Y Y 10 / 11 / 2011
City	State	Zip Code
Crystal Lake	IL	60014
Purpose of Disbursement parade Candy		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	182.57
Office Sought:	Disbursement For: 2012	<b>Transaction ID : SB17.20880</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Party City</b>		Date of Disbursement
Mailing Address 5561 Northwest Hwy		M M / D D / Y Y Y Y 10 / 17 / 2011
City	State	Zip Code
Crystal Lake	IL	60014
Purpose of Disbursement parade Candy		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	7.00
Office Sought:	Disbursement For: 2012	<b>Transaction ID : SB17.20881</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Party City</b>		Date of Disbursement
Mailing Address 5561 Northwest Hwy		M M / D D / Y Y Y Y 10 / 28 / 2011
City	State	Zip Code
Crystal Lake	IL	60014
Purpose of Disbursement parade supplies		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	36.99
Office Sought:	Disbursement For: 2012	<b>Transaction ID : SB17.20882</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	226.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address 5561 Northwest Hwy		Amount of Each Disbursement this Period 26.03
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement parade supplies	Transaction ID : SB17.20883
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00
City Northfield	State IL	
Zip Code 60093	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.20884
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00
City Northfield	State IL	
Zip Code 60093	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.20885
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6026.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.20886</b>
City Northfield	State IL Zip Code 60093	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pro Tuff</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address PO Box 1800		Amount of Each Disbursement this Period 374.75 <b>Transaction ID : SB17.20887</b>
City Crystal Lake	State IL Zip Code 60039-1800	
Purpose of Disbursement T Shirts	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RALC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address POB 784		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.20890</b>
City Libertyville	State IL Zip Code 60048	
Purpose of Disbursement Dues	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3499.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Reachfly</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 440 Westwood Court Suite A		Amount of Each Disbursement this Period 667.92
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Telemarketing	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Reachfly</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address 440 Westwood Court Suite A		Amount of Each Disbursement this Period 1214.06
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Advertising	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Reachfly</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 440 Westwood Court Suite A		Amount of Each Disbursement this Period 5440.58
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Advertising	
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7322.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Reachfly</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 440 Westwood Court Suite A		Amount of Each Disbursement this Period 756.22 <b>Transaction ID : SB17.20897</b>
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Renaissance Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 999 Ninth St. NW		Amount of Each Disbursement this Period 19.73 <b>Transaction ID : SB17.20898</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Roberts Road Mini Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address PO Box 300		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : SB17.20901</b>
City Island Lake	State IL	
Zip Code 60042	Purpose of Disbursement Storage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	850.95
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Roberts Road Mini Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address PO Box 300		Amount of Each Disbursement this Period 75.00
City Island Lake	State IL	
Zip Code 60042	Purpose of Disbursement Storage	Transaction ID : SB17.20902
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Roberts Road Mini Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address PO Box 300		Amount of Each Disbursement this Period 75.00
City Island Lake	State IL	
Zip Code 60042	Purpose of Disbursement Storage	Transaction ID : SB17.20903
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roberts Road Mini Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address PO Box 300		Amount of Each Disbursement this Period 75.00
City Island Lake	State IL	
Zip Code 60042	Purpose of Disbursement Storage	Transaction ID : SB17.20904
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sabatinos</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 4441 W Irving Park Rd		Amount of Each Disbursement this Period 206.45 <b>Transaction ID : SB17.20907</b>
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Volunteer Meals	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sabatinos</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 4441 W Irving Park Rd		Amount of Each Disbursement this Period 69.20 <b>Transaction ID : SB17.20908</b>
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Volunteer Meals	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Schaefer's Fine Wines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 9965 Gross Point Rd		Amount of Each Disbursement this Period 204.88 <b>Transaction ID : SB17.20912</b>
City Skokie	State IL Zip Code 60076	
Purpose of Disbursement Event Catering	Candidate Name	Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	480.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 1719.35
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Strategic Consulting	Transaction ID : SB17.20132
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 2352.00
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Strategic Consulting	Transaction ID : SB17.20133
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sonoma Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 233 Pennsylvania Ave.		Amount of Each Disbursement this Period 48.70
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Transaction ID : SB17.20921
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4120.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sorthling Northrup Attorneys</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011		
Mailing Address 1 N Old State Capital Plaza			Amount of Each Disbursement this Period 2000.00		
City Springfield	State IL	Zip Code 62705	Transaction ID : SB17.20923		
Purpose of Disbursement Legal Fees		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Sorthling Northrup Attorneys</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011		
Mailing Address 1 N Old State Capital Plaza			Amount of Each Disbursement this Period 1347.50		
City Springfield	State IL	Zip Code 62705	Transaction ID : SB17.20924		
Purpose of Disbursement Legal Fees		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Spirit Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011		
Mailing Address 2800 Executive Way			Amount of Each Disbursement this Period 427.38		
City Miramar	State FL	Zip Code 33025	Transaction ID : SB17.20927		
Purpose of Disbursement Travel		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3774.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Sports and More</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address 115 Yorktown Shopping Ctr		Amount of Each Disbursement this Period 242.00 <b>Transaction ID : SB17.20929</b>
City Lombard State IL Zip Code 60148	Purpose of Disbursement Office Repair	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sprint Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address PO Box 660075		Amount of Each Disbursement this Period 135.65 <b>Transaction ID : SB17.20930</b>
City Dallas State TX Zip Code 75266	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sprint Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address PO Box 660075		Amount of Each Disbursement this Period 157.30 <b>Transaction ID : SB17.20931</b>
City Dallas State TX Zip Code 75266	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	534.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. St. Charles Park District</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 37W755 Bolcum		Amount of Each Disbursement this Period 179.00 <b>Transaction ID : SB17.20936</b>
City St Charles	State IL Zip Code 60174	
Purpose of Disbursement Event Site Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 781.56 <b>Transaction ID : SB17.20635</b>
City Deer Park	State IL Zip Code 60010	
Purpose of Disbursement Accounting Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 669.99 <b>Transaction ID : SB17.20636</b>
City Deer Park	State IL Zip Code 60010	
Purpose of Disbursement Accounting Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1630.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.20637</b>
City Deer Park	State IL	
Zip Code 60010	Purpose of Disbursement Accounting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.20638</b>
City Deer Park	State IL	
Zip Code 60010	Purpose of Disbursement Accounting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Subway</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 1818 East Belvidere Rd		Amount of Each Disbursement this Period 180.11 <b>Transaction ID : SB17.20948</b>
City Grayslake	State IL	
Zip Code 60030	Purpose of Disbursement Volunteer Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1230.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Subway</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address 1818 East Belvidere Rd		Amount of Each Disbursement this Period 11.92
City Grayslake State IL Zip Code 60030	Purpose of Disbursement Volunteer Meals	
Candidate Name	Category/Type	Transaction ID : SB17.20949
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Adam Syvertsen</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 330 Marie Lane		Amount of Each Disbursement this Period 282.00
City Schaumburg State IL Zip Code 60193	Purpose of Disbursement Salary	
Candidate Name	Category/Type	Transaction ID : SB17.20640
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Congressional Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2011
Mailing Address 2001 New Hampshire Ave		Amount of Each Disbursement this Period 60.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Meeting Expense	
Candidate Name	Category/Type	Transaction ID : SB17.20962
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	353.92
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. The Congressional Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address 2001 New Hampshire Ave			Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.20963</b>
City Washington	State DC	Zip Code 20009	
Purpose of Disbursement Dues	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Thelma Flagg Trust #1</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 24 E Crystal Lake Ave.			Amount of Each Disbursement this Period 2375.00 <b>Transaction ID : SB17.20974</b>
City Crystal Lake	State IL	Zip Code 60014	
Purpose of Disbursement Rent	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Thelma Flagg Trust #1</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 24 E Crystal Lake Ave.			Amount of Each Disbursement this Period 11875.00 <b>Transaction ID : SB17.20975</b>
City Crystal Lake	State IL	Zip Code 60014	
Purpose of Disbursement Rent	Candidate Name		Category/ Type
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Thomas Cassidy</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011	
Mailing Address 215 9th St SE Apt 1			Amount of Each Disbursement this Period 800.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.20977	
Purpose of Disbursement Web Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tortilla Coast</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011	
Mailing Address 400 First Street SE			Amount of Each Disbursement this Period 43.70	
City Washington	State DC	Zip Code 20016	Transaction ID : SB17.20978	
Purpose of Disbursement Meeting-Meals		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tuscana West</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011	
Mailing Address 1350 I St NW			Amount of Each Disbursement this Period 445.57	
City Washington	State DC	Zip Code 20005	Transaction ID : SB17.20983	
Purpose of Disbursement Event Catering		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1289.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address 77 W Wacker Dr Ste 4100		Amount of Each Disbursement this Period 278.70
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.20984
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 77 W Wacker Dr Ste 4100		Amount of Each Disbursement this Period 25.00
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.20985
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. United States Holocaust</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 100 Raoul Wallenberg PI SW		Amount of Each Disbursement this Period 250.00
City Washington	State DC Zip Code 20024-2126	
Purpose of Disbursement Sponsorship	Candidate Name	Transaction ID : SB17.20987
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	553.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. US Airway</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 400 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 317.40
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Travel	Transaction ID : SB17.20993
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 198.00
City WINNETKA	State IL	
Zip Code 60093	Purpose of Disbursement Postage	Transaction ID : SB17.20994
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 88.00
City WINNETKA	State IL	
Zip Code 60093	Purpose of Disbursement Postage	Transaction ID : SB17.20995
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	603.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 116	
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 132.00
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20996
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 66.00
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20997
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 44.00
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : SB17.20998
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	242.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 966.37 <b>Transaction ID : SB17.20999</b>
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 718.13 <b>Transaction ID : SB17.21000</b>
City Lehigh Valley State PA Zip Code 18002	Purpose of Disbursement Cell phone	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 234.99 <b>Transaction ID : SB17.21001</b>
City Lehigh Valley State PA Zip Code 18002	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	966.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 214.99
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.21002
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 1160.59
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell phone	Transaction ID : SB17.21003
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 128.96
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.21004
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1504.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 116			
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Wilson Perkins Allen</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011		
Mailing Address 1319 Classen Dr			Amount of Each Disbursement this Period 18820.00		
City Oklahoma City	State OK	Zip Code 73103	Transaction ID : SB17.21008		
Purpose of Disbursement Strategic Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. ZaZa Enterprises</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011		
Mailing Address 5047 Shoreline Rd			Amount of Each Disbursement this Period 200.38		
City Lake Barrington	State IL	Zip Code 60010	Transaction ID : SB17.21015		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. ZaZa Enterprises</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011		
Mailing Address 5047 Shoreline Rd			Amount of Each Disbursement this Period 101.12		
City Lake Barrington	State IL	Zip Code 60010	Transaction ID : SB17.21016		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19121.50
<b>TOTAL</b> This Period (last page this line number only).....	142662.80



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 116	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Diane A Wamberg</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 7 Fox Hunt Rd.		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB20A.20097</b>
City Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	700.00

**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 106 OF 116	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Citizens to Elect Tom Weber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2011
Mailing Address 37597 N Douglas Ln		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB21.20091</b>
City Lakeville	State IL	
Zip Code 60046	Purpose of Disbursement Nonfederal Contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. FAMILY-PAC FEDERAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 414 N ORLEANS PLAZA #312		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.20089</b>
City CHICAGO	State IL	
Zip Code 60610	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kendall County Republican Women</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address PO Box 102		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB21.20105</b>
City Yorkville	State IL	
Zip Code 60560	Purpose of Disbursement Nonfederal Contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 116	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Nunda Township Republican Central Cmte</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2011	
Mailing Address 4603 Barrevill Rd.			Amount of Each Disbursement this Period 300.00	
City Prairie Grove	State IL	Zip Code 60012	Transaction ID : SB21.20110	
Purpose of Disbursement Event Sponsorship		Category/ Type 011		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	1950.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Axiom Strategies, LLC</b>	Nature of Debt (Purpose): Strategic Consulting/Research
Mailing Address 1251 NW Briarcliff Pkwy, ste 85	
City State Zip Code Kansas City MO 64116	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.20115</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="25389.38"/>	Payment This Period <input style="width:100%;" type="text" value="12943.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="12446.38"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CBC Tax &amp; Accounting</b>	Nature of Debt (Purpose): Accounting, banking, FEC reporting, following up on campaign issues
Mailing Address 1843 Hicks Rd Suite A	
City State Zip Code Rolling Meadows IL 60008	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="4425.00"/>	<b>Transaction ID : SD10.16684</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="4425.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Decker Consulting Services</b>	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 244 14th Place NE #2	
City State Zip Code Washington DC 20002	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.20119</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="2842.32"/>	Payment This Period <input style="width:100%;" type="text" value="1501.19"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1341.13"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="18212.51"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="0.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.16684

The debt reported to CBC Accounting is in dispute

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jamestown Associates</b>		Nature of Debt (Purpose): Debt owed for design and distribution of mailer
Mailing Address 5 Mapleton Rd, 300		
City	State	Zip Code
Princeton	NJ	08540

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.6001</b>	
<input type="text" value="3650.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3650.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mayer Brown</b>		Nature of Debt (Purpose): Legal Fees-IN DISPUTE
Mailing Address 71 South Wacker Drive		
City	State	Zip Code
Chicago	IL	60606

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.20129</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2025.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2025.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dominic Provenzano</b>		Nature of Debt (Purpose): Campaign bonus owed for successful outcome
Mailing Address 316 Brookwood Tr		
City	State	Zip Code
McHenry	IL	60050

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.16387</b>	
<input type="text" value="4889.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="-4889.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2025.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.16387

Debt reflect gross salary instead of net salary due. Balance was paid in payroll taxes. No further debt due.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RA Adams Enterprises</b>	Nature of Debt (Purpose): Rental of trailer for August
Mailing Address 2600 W Rt 120	
City State Zip Code McHenry IL 60051	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	<b>Transaction ID : SD10.8130</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RA Adams Enterprises</b>	Nature of Debt (Purpose): Monthly rental on trailer
Mailing Address 2600 W Rt 120	
City State Zip Code McHenry IL 60051	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	<b>Transaction ID : SD10.15269</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RA Adams Enterprises</b>	Nature of Debt (Purpose): Monthly rental for trailer
Mailing Address 2600 W Rt 120	
City State Zip Code McHenry IL 60051	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	<b>Transaction ID : SD10.15561</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">1200.00</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">3600.00</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;"> </div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Schuyler, Roche ,Crisham, P.C.**

Mailing Address 1 Prudential Plaza-130 E. Randolph  
Suite 3800

City State Zip Code  
Chicago IL 60601

Nature of Debt (Purpose):  
Legal fees in defence of disputed debt and FEC issue

Outstanding Balance Beginning This Period **Transaction ID : SD10.8122**  
4939.81

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 0.00 4939.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Schuyler, Roche ,Crisham, P.C.**

Mailing Address 1 Prudential Plaza-130 E. Randolph  
Suite 3800

City State Zip Code  
Chicago IL 60601

Nature of Debt (Purpose):  
Legal Fees for dealing with disputed debt

Outstanding Balance Beginning This Period **Transaction ID : SD10.8125**  
2068.52

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 0.00 2068.52

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Schuyler, Roche ,Crisham, P.C.**

Mailing Address 1 Prudential Plaza-130 E. Randolph  
Suite 3800

City State Zip Code  
Chicago IL 60601

Nature of Debt (Purpose):  
Legal fees for defence of disputed debt

Outstanding Balance Beginning This Period **Transaction ID : SD10.8127**  
962.50

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 0.00 962.50

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	7970.83
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal fees in defence of disputed debt
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="918.00"/>	<b>Transaction ID : SD10.15268</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="918.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal fees for disputed debt
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="962.50"/>	<b>Transaction ID : SD10.16398</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="962.50"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal fees for court appearance in regard to disputed debt
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1382.07"/>	<b>Transaction ID : SD10.16399</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1382.07"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="3262.57"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="0.00"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal services in regard to prparqtion of recount
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="14434.51"/>	<b>Transaction ID : SD10.16686</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="10079.70"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="24514.21"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SCM Associates</b>	Nature of Debt (Purpose): Strategic Consulting
Mailing Address PO Box	
City State Zip Code Dublin NH 03444	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : SD10.20131</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="5100.87"/>	Payment This Period <input style="width:100%;" type="text" value="4071.35"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1029.52"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Starfish Consulting</b>	Nature of Debt (Purpose): Consulting on campaign communications and messaging
Mailing Address 118 N Clinton St Suite 102	
City State Zip Code Chicago IL 60661	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2000.00"/>	<b>Transaction ID : SD10.8136</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="-2000.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="25543.73"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text" value="60614.64"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="60614.64"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.8136

Debt was paid in full. Amount has been adjusted to reflect no outstanding debt.

Form/Schedule:

Transaction ID: