

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Reetz for Congress

ADDRESS (number and street) 305 Townepark Circle

Check if different than previously reported. (ACC)
 Suite 101  
 Louisville KY 40243

2. **FEC IDENTIFICATION NUMBER** C00470955

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)
 KY 03

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 01 01 2010 through 03 31 2010

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 Mr. Brian Reetz

Signature of Treasurer Electronically Filed by Mr. Brian Reetz Date 04 15 2010

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Reetz for Congress

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	51597.50	77591.26
(b) Total Contribution Refunds (from Line 20(d)).....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	51597.50	77591.26
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	38704.65	41304.87
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38704.65	41304.87
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	136286.39	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	116589.64	

**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  
Reetz for Congress

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

<b>I. RECEIPTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	47077.50	70427.50
(i) Itemized (use Schedule A).....	3770.00	4787.17
(ii) Unitemized.....	50847.50	75214.67
(iii) TOTAL of contributions from individuals..... ▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACS).....	750.00	750.00
(d) The Candidate.....		1626.59
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	51597.50	77591.26
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>		
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	100000.00	100000.00
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	100000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>		
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>151597.50</b>	<b>177591.26</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	38704.65	41304.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of all Other Loans.....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS.....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	38704.65	41304.87

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	23393.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	151597.50
25. SUBTOTAL (add Line 23 and Line 24).....	174991.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38704.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	136286.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5 / 47
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Reetz for Congress

**A.**

Full Name (Last, First, Middle Initial) MAC-PAC-USA		Date of Receipt
Mailing Address 4747 McLane Parkway		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
City	State	Zip Code
Temple	TX	76504
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-CN94
<input type="text" value="C"/> <input type="text" value="C00215558"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="750.00"/>
Occupation		
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="750.00"/>
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="750.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="750.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Susan Eve Adzick		Date of Receipt
	Mailing Address 112 Chestnut Glen Dr		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Louisville	KY	40245
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer McLane Foodservice		Occupation Vice President Sales And Marketing	Transaction ID: SA11Ai-CN93
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Roger Alsip		Date of Receipt
	Mailing Address 3853 Real Quiet lane		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lexington	KY	40509
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Forcht Group Of KY		Occupation CFO	Transaction ID: SA11Ai-CN81
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas J Atherton		Date of Receipt
	Mailing Address 2120 E. 26th St.		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tulsa	OK	74114
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Atherton Restaurant Systems Inc.		Occupation President	Transaction ID: SA11Ai-CN133
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Barton Beem

Mailing Address 2011 Fairway Vista Dr.

City State Zip Code  
Louisville KY 40245

FEC ID number of contributing federal political committee. C

Name of Employer Retired UPS      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2010  
**Transaction ID:** SA11Ai-CN136  
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 702 Davenport Drive

City State Zip Code  
Louisville KY 40245

FEC ID number of contributing federal political committee. C

Name of Employer Proforma      Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 21 / 2010  
**Transaction ID:** SA11Ai-CN4  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 702 Davenport Drive

City State Zip Code  
Louisville KY 40245

FEC ID number of contributing federal political committee. C

Name of Employer Proforma      Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 290.00

Date of Receipt 03 / 30 / 2010  
**Transaction ID:** SA11Ai-CN138  
 Amount of Each Receipt this Period 40.00  
 Online

**SUBTOTAL** of Receipts This Page (optional) ..... 1290.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dave Bilas</p> <p>Mailing Address 14816 Landmark Drive</p> <p>City State Zip Code Louisville KY 40245</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer General Electric</p> <p>Occupation VP of Sales</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: center;">M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11Ai-CN5</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Dave Bilas</p> <p>Mailing Address 14816 Landmark Drive</p> <p>City State Zip Code Louisville KY 40245</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer General Electric</p> <p>Occupation VP of Sales</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: center;">M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11Ai-CN101</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Jerry Blacketer</p> <p>Mailing Address 8001 Laughton Ln.</p> <p>City State Zip Code Louisville KY 40222</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Blacketer Co.</p> <p>Occupation President - Builder developer reatl</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: center;">M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11Ai-CN67</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </span>



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

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

FOR LINE NUMBER: PAGE 9 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael J Blacketer

Mailing Address 1703 Landmark Place

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
Blacketer Co. General Contractor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	0

**Transaction ID:** SA11Ai-CN83

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. Box 3222

City State Zip Code  
Louisville KY 40201

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

Name of Employer Occupation  
Blue Equity LLC Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	0

**Transaction ID:** SA11Ai-CN6

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14403 Champion Woods Pl.

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
Whayne Supply CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	0

**Transaction ID:** SA11Ai-CN8

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kenneth Ray Brown

Mailing Address 3313 Winchester Rd

City State Zip Code  
Louisville KY 40207

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

Name of Employer Design Plus Occupation Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

**Transaction ID:** SA11Ai-CN95

Amount of Each Receipt this Period  
500.00

Transaction ID 2899348278

**B.** Full Name (Last, First, Middle Initial)  
Robinson S Brown, III

Mailing Address 3600 Woodside Rd

City State Zip Code  
Louisville KY 40222

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

Name of Employer Retired Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

**Transaction ID:** SA11Ai-CN122

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 1914 Stanley Gault Pkwy

City State Zip Code  
Louisville KY 40223

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

Name of Employer ARG Financial Group Occupation CFP-Senior Partner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	1	0

**Transaction ID:** SA11Ai-CN10

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 10906 Old Harrods Woods Circle

City State Zip Code  
Louisville KY 40223

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 9 / 2 0 1 0

**Transaction ID:** SA11Ai-CN11

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1765 Alpine Dr.

City State Zip Code  
Clarksville TN 37040

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

Name of Employer CARRECA ENTERPRISES Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 2 / 2 0 1 0

**Transaction ID:** SA11Ai-CN12

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Grover S Cox

Mailing Address 1918 Buttudwood Rd

City State Zip Code  
Louisville KY 40222

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

Name of Employer Ted Mussler & Ass. Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 5 / 2 0 1 0

**Transaction ID:** SA11Ai-CN63

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 47
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Bradley J Devries	Date of Receipt MM / DD / YYYY 03 / 24 / 2010
	Mailing Address 111 Old Forest Road	<b>Transaction ID:</b> SA11Ai-CN117
	City State Zip Code Pewee Valley KY 40056	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Semonon Realtors Pres/CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Richard L Duffy	Date of Receipt MM / DD / YYYY 03 / 24 / 2010
	Mailing Address 5801 Glen Park Road	<b>Transaction ID:</b> SA11Ai-CN107
	City State Zip Code Louisville KY 40222	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Creative Alliance Advertising	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Bernie Fineman	Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address	<b>Transaction ID:</b> SA11Ai-CN74
	City State Zip Code	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Caldwell Tanks President/CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	4000.00
<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 13 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Marion Forcht  
 Mailing Address 500 Scenic View Dr.  
 City Corbin State KY Zip Code 40701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Forcht Insurance Inc Occupation President  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt: 03 / 02 / 2010  
**Transaction ID: SA11Ai-CN77**  
 Amount of Each Receipt this Period: 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Terry E Forcht  
 Mailing Address 500 Scenic View Dr.  
 City Corbin State KY Zip Code 40701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Forcht Group Of Kentucky Occupation Chairman And Ceo  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt: 03 / 02 / 2010  
**Transaction ID: SA11Ai-CN76**  
 Amount of Each Receipt this Period: 2400.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Jean W Frazier  
 Mailing Address 4810 Cherry Valley  
 City Prospect State KY Zip Code 40059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NFN Inc Occupation Real Estate  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt: 03 / 16 / 2010  
**Transaction ID: SA11Ai-CN87**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5800.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard J. Freeland	Date of Receipt MM / DD / YYYY 01 / 22 / 2010
	Mailing Address 7100 W Jefferson Blvd	<b>Transaction ID:</b> SA11Ai-CN18
	City State Zip Code Fort Wayne IN 46804	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pizza Hut of Ft Wayne Inc Owner	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bryan Johnson	Date of Receipt MM / DD / YYYY 03 / 24 / 2010
	Mailing Address 14107 Lake Forest Ln.	<b>Transaction ID:</b> SA11Ai-CN104
	City State Zip Code Louisville KY 40245	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Main Street Realty Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Tom Jolly	Date of Receipt MM / DD / YYYY 02 / 22 / 2010
	Mailing Address 2607 Ballantrae Cir.	<b>Transaction ID:</b> SA11Ai-CN70
	City State Zip Code Louisville KY 40241	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Commonwealth Sign Co INC Owner	
Receipt For: 2010 <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) .....	2000.00
<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 15 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 471 W.Main St. Ste 203

City State Zip Code  
Louisville KY 40202

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

Name of Employer Retired      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼      1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 1 0

**Transaction ID:** SA11Ai-CN82

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 8 Woodhill Rd.

City State Zip Code  
Louisville KY 40207

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

Name of Employer Retired      Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 1 3 / 2 0 1 0

**Transaction ID:** SA11Ai-CN24

Amount of Each Receipt this Period  
500.00

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

Mailing Address 14045 Shelbyville Rd.

City State Zip Code  
Louisville KY 40245

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

Name of Employer Valhalla Dental      Occupation Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

**Transaction ID:** SA11Ai-CN26

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►      2000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 2110 Club Vista Pl.

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
Jak Foods Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2010

**Transaction ID:** SA11Ai-CN66

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2322 Village Drive

City State Zip Code  
Louisville KY 40205

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

Name of Employer Occupation  
Self Mother/Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2010

**Transaction ID:** SA11Ai-CN62

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3399 S Lakeshore Dr.

City State Zip Code  
Saint Joseph MI 49085

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

Name of Employer Occupation  
Trigo Hospitality Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
01 / 08 / 2010

**Transaction ID:** SA11Ai-CN29

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 17 / 47</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bob Hardin Marrett</p> <p>Mailing Address 318 Longview Park Pl.</p> <p>City State Zip Code Louisville KY 40245</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer CMB Development Company LLC</p> <p>Occupation Builder</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11Ai-CN30</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">250.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	1	0	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1		1	8		2	0	1	0																						
250.00																															

<p><b>B.</b> Full Name (Last, First, Middle Initial) Bob Hardin Marrett</p> <p>Mailing Address 318 Longview Park Pl.</p> <p>City State Zip Code Louisville KY 40245</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer CMB Development Company LLC</p> <p>Occupation Builder</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11Ai-CN68</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">250.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	7		2	0	1	0	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	2		1	7		2	0	1	0																						
250.00																															

<p><b>C.</b> Full Name (Last, First, Middle Initial) Bob Hardin Marrett</p> <p>Mailing Address 318 Longview Park Pl.</p> <p>City State Zip Code Louisville KY 40245</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer CMB Development Company LLC</p> <p>Occupation Builder</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p style="text-align: right;">750.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11Ai-CN91</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">250.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1	0	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	3		1	9		2	0	1	0																						
250.00																															

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<table border="1" style="width: 100%;"> <tr><td colspan="10">750.00</td></tr> </table>	750.00									
750.00											
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<table border="1" style="width: 100%; height: 20px;"> <tr><td colspan="10"></td></tr> </table>										

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

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

FOR LINE NUMBER: PAGE 18 / 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Bob Hardin Marrett

Mailing Address 318 Longview Park Pl.

City State Zip Code  
Louisville KY 40245

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

Name of Employer CMB Development Company LLC Occupation Builder

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

Transaction ID: SA11Ai-CN111

Amount of Each Receipt this Period  
100.00

website CC

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

Mailing Address 318 Longview Park Pl.

City State Zip Code  
Louisville KY 40245

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

Name of Employer CMB Development Company LLC Occupation Builder

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

Transaction ID: SA11Ai-CN121

Amount of Each Receipt this Period  
150.00

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

Mailing Address 14611 Lake Bluff Place

City State Zip Code  
Louisville KY 40245

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

Name of Employer I've Got It Occupation Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
287.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 25 / 2010

Transaction ID: SA11Ai-CN98

Amount of Each Receipt this Period  
287.50

In-Kind Received 45 shirts  
\* \$5.50 + 2 screens @ \$20.00 = \$287.50

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **537.50**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Jerome (jerry) Miller		Date of Receipt
	Mailing Address 1101 Summitview		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 0 4 / 2 0 1 0
	City	State	Zip Code
	Yakima	WA	98902
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11Ai-CN34
Name of Employer Pizza Hut		Occupation Pizza Hut Franchise	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Don Parkinson		Date of Receipt
	Mailing Address 550 Farfield Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Louisville	KY	40206
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11Ai-CN72
Name of Employer KFC		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Andy Peterson		Date of Receipt
	Mailing Address 2516 Sanberg Ct.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 1 3 / 2 0 1 0
	City	State	Zip Code
	Bloomington	IN	47401
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11Ai-CN37
Name of Employer Peterson Company		Occupation Owner	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Christopher Randell Pruniski

Mailing Address 1208 Winterbranch Way

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
General Electric Senior Management

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

**Transaction ID:** SA11Ai-CN102

Amount of Each Receipt this Period  
1000.00

1000.00

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

Mailing Address 15605 Beckley Crossing Dr.

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
Steel Technologies CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 18 / 2010

**Transaction ID:** SA11Ai-CN38

Amount of Each Receipt this Period  
1000.00

1000.00

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

Mailing Address 4014 Therina Way

City State Zip Code  
Louisville KY 40241

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

Name of Employer Occupation  
Real M Construction Construction Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2010

**Transaction ID:** SA11Ai-CN116

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.** Full Name (Last, First, Middle Initial)  
Julie Reetz  
Mailing Address 14609 Landis Villa Dr  
City State Zip Code  
Louisville KY 40245  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Homemaker Homemaker  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 0 2 / 2 0 1 0  
Transaction ID: SA11Ai-CN75  
Amount of Each Receipt this Period  
1000.00  
Done over internet Card Pay

**B.** Full Name (Last, First, Middle Initial)  
Ken Reutlinger  
Mailing Address 6511 Glenridge Park Pl.  
#10  
City State Zip Code  
Louisville KY 40222  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Wakefield Reutlinger Co. Real Estate  
Realtors  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 1 1 / 2 0 1 0  
Transaction ID: SA11Ai-CN43  
Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Ken Reutlinger  
Mailing Address 6511 Glenridge Park Pl.  
#10  
City State Zip Code  
Louisville KY 40222  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Wakefield Reutlinger Co. Real Estate  
Realtors  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 1 0  
Transaction ID: SA11Ai-CN119  
Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 6511 Glenridge Park PL  
Ste 10

City State Zip Code  
Louisville KY 40222

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

Name of Employer Wakefield Reutlinger and Company Rea  
Occupation Independent Contractor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 1 0

**Transaction ID:** SA11Ai-CN120

Amount of Each Receipt this Period  
1000.00

1000.00

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

Mailing Address 750 grange lane

City State Zip Code  
Lexington KY 40511

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

Name of Employer Forcht Group Of KY  
Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 0 2 / 2 0 1 0

**Transaction ID:** SA11Ai-CN80

Amount of Each Receipt this Period  
1000.00

1000.00

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

Mailing Address 2000 Fairway Vista Dr

City State Zip Code  
Louisville KY 40245

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

Name of Employer Self  
Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 1 0

**Transaction ID:** SA11Ai-CN115

Amount of Each Receipt this Period  
300.00

300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 11518 Main St.

City State Zip Code  
Louisville KY 40243

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

Name of Employer Occupation  
Thoroughbred Associates Vice President  
INC

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
01 / 21 / 2010

**Transaction ID:** SA11Ai-CN45

Amount of Each Receipt this Period  
250.00

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

Mailing Address 229 Peach Valley Pt.

City State Zip Code  
Fallatin TN 37066

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

Name of Employer Occupation  
Retired GE Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
01 / 18 / 2010

**Transaction ID:** SA11Ai-CN46

Amount of Each Receipt this Period  
350.00

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

Mailing Address 2600 Locust Hill Pl

City State Zip Code  
Louisville KY 40245

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

Name of Employer Occupation  
Masonite Inc. Sales Manager

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2010

**Transaction ID:** SA11Ai-CN99

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 47  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

**A.**

Full Name (Last, First, Middle Initial) Laurie Shockley		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2010	
Mailing Address 3275 Georgetown Rd		<b>Transaction ID:</b> SA11Ai-CN79	
City Paris	State KY	Zip Code 40361	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Homemaker		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	2000.00	

**B.**

Full Name (Last, First, Middle Initial) Rodney Shockley		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2010	
Mailing Address 3275 Georgetown Rd		<b>Transaction ID:</b> SA11Ai-CN78	
City Paris	State KY	Zip Code 40361	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Forcht Group Of KY	Occupation General Counsel		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	2000.00	

**C.**

Full Name (Last, First, Middle Initial) Mary Ellen Stottmann		Date of Receipt M M / D D / Y Y Y Y Y 03 / 19 / 2010	
Mailing Address 5204 Avish Ln		<b>Transaction ID:</b> SA11Ai-CN96	
City Harrods Creek	State KY	Zip Code 40027	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2010 <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) .....	5000.00
<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 25 / 47  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

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

Mailing Address 9721 Ormsby Station Rd.  
Ste 103

City State Zip Code  
Louisville KY 40223

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

Name of Employer Occupation  
OptiComm Solutions Group President/CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 1 / 2 0 1 0

**Transaction ID:** SA11Ai-CN49

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8305 Salford Way

City State Zip Code  
Louisville KY 40222

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

Name of Employer Occupation  
RE/MAX Properties East CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 1 0

**Transaction ID:** SA11Ai-CN140

Amount of Each Receipt this Period  
300.00

internet credit card

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

Mailing Address 3400 Dutchmans Ln.

City State Zip Code  
Louisville KY 40206

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

Name of Employer Occupation  
King & Co. Executive Assistant

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

**Transaction ID:** SA11Ai-CN55

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 47	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Reetz for Congress
---

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel Woodside	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 4 indian Hills Trail	<b>Transaction ID:</b> SA11Ai-CN137
	City State Zip Code Louisville KY 40207	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Online
	Name of Employer Occupation Unified Foodservice Purchasing Co-OpL CEO	
	Receipt For: 2010 <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) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	47077.50

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 47  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.

Full Name (Last, First, Middle Initial)  
Jeff Reetz

Mailing Address 14609 Landis Villa Dr.

City State Zip Code  
Louisville KY 40245

FEC ID number of contributing federal political committee. **C** H0KY03200

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 30 / 2010

Transaction ID: SA13a-LN1

Amount of Each Receipt this Period  
100000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	100000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Trail Blazer Campaign Services Inc.  Mailing Address 5115 Excelsior Blvd #103  City Minneapolis State MN Zip Code 55416  Purpose of Disbursement Trail Blazer install account Candidate Name <span style="float: right;">001 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX107 Date of Disbursement 01 / 28 / 2010  Amount of Each Disbursement this Period 1000.00  Trail Blazer install account
B.	Full Name (Last, First, Middle Initial) Vistaprint  Mailing Address www.vistaprint.com 95 Hayden Ave  City Lexington State MA Zip Code 02421  Purpose of Disbursement Return address labels and folded note cards with white envelopes Candidate Name <span style="float: right;">001 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX19 Date of Disbursement 01 / 05 / 2010  Amount of Each Disbursement this Period 142.72  Return address labels and folded note cards with white envelopes
C.	Full Name (Last, First, Middle Initial) Walmart  Mailing Address 12981 Shelbyville Rd  City Louisville State KY Zip Code 40243  Purpose of Disbursement phone transfer Candidate Name <span style="float: right;">001 Category/ Type</span>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX69 Date of Disbursement 03 / 25 / 2010  Amount of Each Disbursement this Period 84.52  phone transfer

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

1227.24

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

1227.24

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Middletown Post Office <hr/> Mailing Address 119 Evergreen Rd <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement stamps Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX49 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 39.60 stamps

<b>B.</b> Full Name (Last, First, Middle Initial) Middletown Post Office <hr/> Mailing Address 119 Evergreen Rd <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement stamps Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX51 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 132.00 stamps

<b>C.</b> Full Name (Last, First, Middle Initial) Middletown Post Office <hr/> Mailing Address 119 Evergreen Rd <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement stamps ang mailing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17-EX63 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 67.39 stamps ang mailing

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	238.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.

Full Name (Last, First, Middle Initial)

Chase Bank Paymentech

Mailing Address 12016 Shelbyville Rd

City Louisville State KY Zip Code 40243

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB17-EX97

Date of Disbursement

MM / DD / YYYY  
03 / 02 / 2010

Amount of Each Disbursement this Period

40.15

Administrative/Salary/Overhead Expenses

B.

Full Name (Last, First, Middle Initial)

2jr Pizza Enterprises

Mailing Address 305 Townepark Cir. Suite101

City Louisville State KY Zip Code 40243

Purpose of Disbursement rentUtilities

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB17-EX39

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2010

Amount of Each Disbursement this Period

7584.97

rentUtilities

C.

Full Name (Last, First, Middle Initial)

2jr Pizza Enterprises

Mailing Address 305 Townepark Cir. Suite101

City Louisville State KY Zip Code 40243

Purpose of Disbursement Benefits

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: SB17-EX48

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2010

Amount of Each Disbursement this Period

159.44

Benefits

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

7784.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Eroots <hr/> Mailing Address 305 Townepark Cir. Suite101 <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement Website project deposit Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX20 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1250.00</div> <hr/> Website project deposit
B.	Full Name (Last, First, Middle Initial) Eroots <hr/> Mailing Address 305 Townepark Cir. Suite101 <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement february website Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX36 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1250.00</div> <hr/> february website
C.	Full Name (Last, First, Middle Initial) Eroots <hr/> Mailing Address 305 Townepark Cir. Suite101 <hr/> City Louisville State KY Zip Code 40243 <hr/> Purpose of Disbursement website Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">004</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX66 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">22.34</div> <hr/> website

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">2522.34</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Banacom Instant Sign</p> <p>Mailing Address 10254 Shelbyville Rd</p> <p>City Louisville State KY Zip Code 40223</p> <p>Purpose of Disbursement 2 2x8 Reetz for Congress Banners</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX22</p> <p>Date of Disbursement 01 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 203.52</p> <p>001 Category/ Type</p> <p>2 2x8 Reetz for Congress Banners</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Farley Printing</p> <p>Mailing Address 1014 South Sixth St.</p> <p>City Louisville State KY Zip Code 40203</p> <p>Purpose of Disbursement 1000 Lapel Stickers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX23</p> <p>Date of Disbursement 01 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 272.42</p> <p>001 Category/ Type</p> <p>1000 Lapel Stickers</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kentucky State Treasurer</p> <p>Mailing Address 1050 Us Highway 127 South Suite</p> <p>City Frankfort State KY Zip Code 40601</p> <p>Purpose of Disbursement Candidate Filing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX24</p> <p>Date of Disbursement 01 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>001 Category/ Type</p> <p>Candidate Filing Fee</p>

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

**975.94**

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



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Ladyfingers Fine Catering Inc.	Transaction ID: SB17-EX28 Date of Disbursement
	Mailing Address 12901 Old Henry Road	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Louisville State KY Zip Code 40223	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering for 1/19/2010 event	<input type="text" value="1116.37"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Catering for 1/19/2010 event

B.	Full Name (Last, First, Middle Initial) Proforma Systems & Solutions	Transaction ID: SB17-EX29 Date of Disbursement
	Mailing Address PO Box 640814	<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45264	Amount of Each Disbursement this Period
	Purpose of Disbursement Printed Products Inc. Invoice#543658 ENV	<input type="text" value="252.24"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Printed Products Inc. Invoice#543658 ENV

C.	Full Name (Last, First, Middle Initial) Rachel Pecor	Transaction ID: SB17-EX31 Date of Disbursement
	Mailing Address 305 Townepark Cir. #101	<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Louisville State KY Zip Code 40243	Amount of Each Disbursement this Period
	Purpose of Disbursement Re-Location Expenses	<input type="text" value="750.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Re-Location Expenses

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2118.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Granite Telecommunications <hr/> Mailing Address 100 Newport Ave Ext. <hr/> City Quincy State MA Zip Code 02171 <hr/> Purpose of Disbursement telephone set up and service 1/1/10 - 1/31/10 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX33 Date of Disbursement 02 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 322.50 <hr/> telephone set up and service 1/1/10 - 1/31/10
B.	Full Name (Last, First, Middle Initial) Granite Telecommunications <hr/> Mailing Address 100 Newport Ave Ext. <hr/> City Quincy State MA Zip Code 02171 <hr/> Purpose of Disbursement Phone service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX110 Date of Disbursement 03 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 87.78 <hr/> Phone service
C.	Full Name (Last, First, Middle Initial) Chase Credit Card <hr/> Mailing Address P.O Box 15298 <hr/> City Wilmington State DE Zip Code 19850 <hr/> Purpose of Disbursement Credit Card Paid by Chase Credit Card Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX43 Date of Disbursement 02 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 708.59 <hr/> Credit Card Paid by Chase Credit Card

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

1118.87

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.

Full Name (Last, First, Middle Initial)  
Delta Airlines

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX40  
Date of Disbursement

01 / 15 / 2010

Amount of Each Disbursement this Period

346.30

[MEMO ITEM]  
Consultant Flight

B.

Full Name (Last, First, Middle Initial)  
Delta Airlines

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX42  
Date of Disbursement

01 / 18 / 2010

Amount of Each Disbursement this Period

342.30

[MEMO ITEM]  
Consultant Flight

C.

Full Name (Last, First, Middle Initial)  
Vistaprint

Mailing Address www.vistaprint.com  
95 Hayden Ave

City Lexington State MA Zip Code 02421

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: SB17-EX41  
Date of Disbursement

02 / 04 / 2010

Amount of Each Disbursement this Period

19.99

[MEMO ITEM]  
website

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Charlene Stumler</p> <p>Mailing Address 2508 Weicher Ave.</p> <p>City Louisville State KY Zip Code 40220</p> <p>Purpose of Disbursement pay 2/11-2/24</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX45</p> <p>Date of Disbursement 02 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 454.26</p> <p>001 Category/ Type</p> <p>pay 2/11-2/24</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Charlene Stumler</p> <p>Mailing Address 2508 Weicher Ave.</p> <p>City Louisville State KY Zip Code 40220</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX56</p> <p>Date of Disbursement 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 618.07</p> <p>001 Category/ Type</p> <p>Payroll</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Charlene Stumler</p> <p>Mailing Address 2508 Weicher Ave.</p> <p>City Louisville State KY Zip Code 40220</p> <p>Purpose of Disbursement 3/12/10-3/25/10</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX71</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 737.66</p> <p>001 Category/ Type</p> <p>3/12/10-3/25/10</p>

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

1809.99

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alyson Reetz</p> <p>Mailing Address 14609 Landis Villa Drive</p> <p>City Louisville State KY Zip Code 40245</p> <p>Purpose of Disbursement pay 2/11-2/24</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX46</p> <p>Date of Disbursement MM / DD / YYYY 02 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 661.25</p> <p>001 Category/ Type</p> <p>pay 2/11-2/24</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Alyson Reetz</p> <p>Mailing Address 14609 Landis Villa Drive</p> <p>City Louisville State KY Zip Code 40245</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX57</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1277.45</p> <p>001 Category/ Type</p> <p>payroll</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alyson Reetz</p> <p>Mailing Address 14609 Landis Villa Drive</p> <p>City Louisville State KY Zip Code 40245</p> <p>Purpose of Disbursement 3/11/10-3/24/10</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17-EX72</p> <p>Date of Disbursement MM / DD / YYYY 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1277.44</p> <p>001 Category/ Type</p> <p>3/11/10-3/24/10</p>

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

3216.14

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.

Full Name (Last, First, Middle Initial)  
Pfoto.com

Mailing Address 208 Eline Ave.

City State Zip Code  
Louisville KY 40207

Purpose of Disbursement  
Protrait images invoice NO. 14403

Candidate Name

006  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX62  
Date of Disbursement

03 / 19 / 2010

Amount of Each Disbursement this Period

250.00

Protrait images invoice  
NO. 14403

B.

Full Name (Last, First, Middle Initial)  
Strategic Media Services Inc.

Mailing Address 3299 K Street NW

City State Zip Code  
Washington DC 40007

Purpose of Disbursement  
TV media

Candidate Name

004  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX50  
Date of Disbursement

03 / 11 / 2010

Amount of Each Disbursement this Period

5884.00

TV media

C.

Full Name (Last, First, Middle Initial)  
Mail Louisville

Mailing Address 10711 Electron Dr

City State Zip Code  
Louisville KY 40299

Purpose of Disbursement  
Postcard Mailing Job#31762

Candidate Name

004  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17-EX52  
Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

7191.57

Postcard Mailing Job#317-  
62

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

13325.57

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Mail Louisville  Mailing Address 10711 Electron Dr  City Louisville State KY Zip Code 40299  Purpose of Disbursement 2nd round postcard mailing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX60 Date of Disbursement 03 / 18 / 2010  Amount of Each Disbursement this Period 425.44  2nd round postcard mailing
B.	Full Name (Last, First, Middle Initial) Insight Media  Mailing Address 10350 Ormsby Park Place  City Louisville State KY Zip Code 40223  Purpose of Disbursement TV Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX61 Date of Disbursement 03 / 18 / 2010  Amount of Each Disbursement this Period 1600.00  TV
C.	Full Name (Last, First, Middle Initial) Kevin Reetz  Mailing Address 911 Reazor Ave  City Louisville State KY Zip Code 40217  Purpose of Disbursement payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17-EX58 Date of Disbursement 02 / 11 / 2010  Amount of Each Disbursement this Period 312.04  payroll

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

2337.48

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 47

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

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NAME OF COMMITTEE (In Full)  
Reetz for Congress

A.	Full Name (Last, First, Middle Initial) Kevin Reetz  Mailing Address 911 Reazor Ave  City Louisville State KY Zip Code 40217  Purpose of Disbursement 3/11/10-3/24/10 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX73 Date of Disbursement 03 / 26 / 2010  Amount of Each Disbursement this Period 359.27  3/11/10-3/24/10  Category/Type 001
B.	Full Name (Last, First, Middle Initial) I've Got It  Mailing Address 14611 Lake Bluff PLace  City Louisville State KY Zip Code 40245  Purpose of Disbursement T-Shirts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-EX67 Date of Disbursement 03 / 22 / 2010  Amount of Each Disbursement this Period 363.87  T-Shirts  Category/Type 006
C.	Full Name (Last, First, Middle Initial) Kathy Mattingly  Mailing Address 14611 Lake Bluff Place  City Louisville State KY Zip Code 40245  Purpose of Disbursement IN-KIND RECEIVED 45 shirts * \$5.50 + 2 screens @ \$20.00 = \$287.50 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17-CN98 Date of Disbursement 02 / 25 / 2010  Amount of Each Disbursement this Period 287.50  In-Kind Received 45 shirts * \$5.50 + 2 screens @ \$20.00 = \$287.50  Category/Type

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

1010.64

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

37686.37



# SCHEDULE C (FEC Form 3)

## LOANS

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

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
Reetz for Congress

Transaction ID: SC10-LN1

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Jeff Reetz - [PERSONAL FUNDS]

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 14609 Landis Villa Dr.

City Louisville State KY ZIP Code 40245

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	.00	100000.00

### TERMS

Date Incurred:    Date Due: 20101104 Interest Rate: 0.0000 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="100000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input type="text" value="100000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for  
 Information found on  
 Page 42 / 47 of Schedule C

Name of Committee (in Full) <b>Reetz for Congress</b>		FEC IDENTIFICATION NUMBER C00470955	
Back Ref ID: SC10-LN1			
LENDING INSTITUTION (LENDER) Full Name Jeff Reetz		Amount of Loan 100000.00	Interest Rate (APR) 0.0000 %
Mailing Address 14609 Landis Villa Dr.		Date Incurred or Established 03 30 2010	
City Louisville	State KY	Zip Code 40245	Date Due 20101104
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		If yes, date originally incurred : 03 30 2010	
B. If line of credit, Amount of this Draw: .00		Total Outstanding balance : 100000.00	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? _____ Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? _____	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: _____		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Mr. Brian Reetz Signature _____		DATE 03 30 2010	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Mr. Brian Reetz Signature _____		DATE 03 30 2010	
Title Treasurer			

**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)  
Reetz for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Crawford Williams Creative			Nature of Debt (Purpose): Invoice: Graphic Design invoice#100974
Mailing Address 202 Chestnut Avenue			
City	State	ZIP Code	
La Grange	KY	40031	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10-INV62</b>	
<input type="text" value=".00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="800.00"/>	<input type="text" value=".00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="800.00"/>

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest			Nature of Debt (Purpose): Invoice: Long Distance Ph- one Administrat
Mailing Address P.O Box 52187			
City	State	ZIP Code	
Phoenix	AZ	85072	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10-INV64</b>	
<input type="text" value=".00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="24.30"/>	<input type="text" value=".00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="24.30"/>

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest			Nature of Debt (Purpose): Invoice: Long Distance Ph- one Administrat
Mailing Address P.O Box 52187			
City	State	ZIP Code	
Phoenix	AZ	85072	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10-INV65</b>	
<input type="text" value=".00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="76.83"/>	<input type="text" value=".00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="76.83"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="901.13"/>
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"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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)  
Reetz for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: letterhead and envelope Adminis
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		<b>Transaction ID: SD10-INV69</b>	
Amount Incurred This Period <input type="text" value="1360.29"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="1360.29"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: POstcard mailing Administrative
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		<b>Transaction ID: SD10-INV70</b>	
Amount Incurred This Period <input type="text" value="3525.24"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="3525.24"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: Podium Sign and Banner Advertis
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>		<b>Transaction ID: SD10-INV68</b>	
Amount Incurred This Period <input type="text" value="321.18"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="321.18"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="5206.71"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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)  
Reetz for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mail Louisville			Nature of Debt (Purpose): Invoice: mailing Advertising Expenses
Mailing Address 10711 Electron Dr			
City Louisville	State KY	ZIP Code 40299	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV89</b>	
Amount Incurred This Period <input type="text" value="1557.04"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1557.04"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mail Louisville			Nature of Debt (Purpose): Invoice: mailing Advertising Expenses
Mailing Address 10711 Electron Dr			
City Louisville	State KY	ZIP Code 40299	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV90</b>	
Amount Incurred This Period <input type="text" value="120.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="120.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Eroots			Nature of Debt (Purpose): Invoice: website Month of March Administ
Mailing Address 305 Townepark Cir. Suite101			
City Louisville	State KY	ZIP Code 40243	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV74</b>	
Amount Incurred This Period <input type="text" value="192.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="192.50"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1869.54"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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)  
Reetz for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Strategic Media Services Inc.			Nature of Debt (Purpose): Invoice: TV 3/31-4/6/10 and 4/7-4/13/10
Mailing Address 3299 K Street NW			
City Bethlehem	State KY	ZIP Code 40007	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV75</b>	
Amount Incurred This Period <input type="text" value="5884.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5884.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: bumper stickers Campaign Materi
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV76</b>	
Amount Incurred This Period <input type="text" value="632.03"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="632.03"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: invoice number 0600001950
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID: SD10-INV85</b>	
Amount Incurred This Period <input type="text" value="694.23"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="694.23"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="7210.26"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

(Use separate schedule(s) for each numbered line)	PAGE 47 / 47	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Reetz for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Proforma Systems & Solutions			Nature of Debt (Purpose): Invoice: Invoice 06000019-49 Campaign Mat
Mailing Address PO Box 640814			
City Cincinnati	State OH	ZIP Code 45264	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD10-INV86</b>	
.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1402.00	.00	1402.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1402.00
2) <b>TOTALS</b> This Period (last page this line number only).....	16589.64
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	100000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	116589.64