



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Roraback for Congress**

Report Covering the Period: From:   /     To:   /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	237687.08	237687.08
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	237687.08	237687.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	17738.76	17738.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	17738.76	17738.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	219948.32	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	16082.27	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Roraback for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	224785.28	224785.28
(ii) Unitemized.....	12901.80	12901.80
(iii) TOTAL of contributions from individuals ▶	237687.08	237687.08
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	237687.08	237687.08
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	237687.08	237687.08

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17738.76	17738.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	17738.76	17738.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	237687.08
25. SUBTOTAL (add Line 23 and Line 24).....	237687.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17738.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	219948.32

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 93 SHARON ROAD

City LAKEVILLE State CT Zip Code 06039-2111

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

Name of Employer ACKLINS ASSOCIATES Occupation REAL ESTATE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.196**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 93 SHARON ROAD

City LAKEVILLE State CT Zip Code 06039

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.335**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 71 JENNINGS ROAD

City SOUTH KENT State CT Zip Code 06785-1206

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.370**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD J. ASSENZA**

Mailing Address 333 W. HYERDALE DRIVE

City State Zip Code  
GOSHEN CT 06756-1709

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

Name of Employer Occupation  
ASSENZA BUILDERS BUILDER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.139**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 60 LOEFFLER ROAD APT P107

City State Zip Code  
BLOOMFIELD CT 06002-2280

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.344**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 144 BUCKS ROCK ROAD

City State Zip Code  
NEW MILFORD CT 06776-5342

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

Name of Employer Occupation  
GEORGETOWN UNIVERSITY PROFESSOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2011

**Transaction ID : SA11.58**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARY M. BAINBRIDGE**

Mailing Address **20 PILGRIM ROAD**

City **WEST HARTFORD** State **CT** Zip Code **06117-2239**

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

Name of Employer **SELF EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.75**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **166 BALDWIN HILL ROAD**

City **WASHINGTON DEPOT** State **CT** Zip Code **06794-1002**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.119**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **P.O. BOX 1069**

City **SHARON** State **CT** Zip Code **06069-1069**

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

Name of Employer **HOTCHKISS SCHOOL** Occupation **DEVELOPMENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.63**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **152 WYKEHAM ROAD**

City **WASHINGTON** State **CT** Zip Code **06793-1314**

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

Name of Employer **NAJETI VENTURES** Occupation **FINANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

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

**Transaction ID : SA11.120**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

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

Mailing Address **1 TOWN HILL ROAD**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.60**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **49 NORFOLK ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-2513**

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

Name of Employer **SELF** Occupation **OPTOMETRIST**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.273**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**2750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARIE LOUISE BOGDANOVICS**

Mailing Address 47 CHESTNUT HILL ROAD

City LITCHFIELD State CT Zip Code 06759-4101

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.141**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EDWIN G. BOOTH JR.**

Mailing Address 2 COVENTRY LANE

City HARWINTON State CT Zip Code 06791-2413

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

Name of Employer TORRINGTON CASTING CO. Occupation FOUNDRY MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.142**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 25

City LITCHFIELD State CT Zip Code 06759-0025

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.225**

Amount of Each Receipt this Period  
 750.00

CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN T. BOOTH**

Mailing Address **P.O. BOX 25**

City **LITCHFIELD** State **CT** Zip Code **06759-0025**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11.440**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **992 LITCHFIELD STREET**

City **TORRINGTON** State **CT** Zip Code **06790-6029**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

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

**Transaction ID : SA11.128**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

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

Mailing Address **71 SOUTH STREET  
P.O. BOX 1855**

City **LITCHFIELD** State **CT** Zip Code **06759-4005**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.243**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>CHARLES BOURGET</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2011
Mailing Address P.O. BOX 271821		<b>Transaction ID : SA11.218</b>
City WEST HARTFORD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BOURGET RESEARCH GROUP	Occupation MARKETING RESEARCH	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>ROBERT B. BOUVIER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011
Mailing Address 150 BALFOUR DRIVE		<b>Transaction ID : SA11.77</b>
City WEST HARTFORD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BOUVIER INSURANCE	Occupation INSURANCE	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>MR. JOHN F. BOYD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2011
Mailing Address GOSHEN ROAD P.O. BOX 161		<b>Transaction ID : SA11.255</b>
City LITCHFIELD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer CT JUNIOR REPUBLIC	Occupation EX. DIRECTOR	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BYRON BROOKS**

Mailing Address **42 E. CHESTNUT HILL ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-4121**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.278**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.277**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **62 WESTWOOD ROAD**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.78**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **26 EAST 93RD STREET 10CD**

City **NEW YORK** State **NY** Zip Code **10128**

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

Name of Employer **BLUE SQUARE CAPITAL** Occupation **FOUNDER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

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

**Transaction ID : SA11.351**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address **20 COLONY ROAD**

City **WEST HARTFORD** State **CT** Zip Code **06117-2214**

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

Name of Employer **RC KNOX** Occupation **INSURANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.79**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **205 WHISCONIER RD P.O. BOX 5188**

City **BROOKFIELD** State **CT** Zip Code **06804-5188**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : SA11.373**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**3750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR RICHARD H. CAULFIELD**

Mailing Address 9601 CASTLE POINT DR. UNIT 813

City State Zip Code  
SARASOTA FL 34238-3381

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SA11.237**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 39 TAMARACK LANE

City State Zip Code  
GOSHEN CT 06756-1008

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

Name of Employer Occupation  
OPTIWIND MANUFACTURING MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

**Transaction ID : SA11.320**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 232 INDIAN MT ROAD

City State Zip Code  
LAKEVILLE CT 06039-2006

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.369**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

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

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R. CHANDLER**

Mailing Address 232 INDIAN MT ROAD

City LAKEVILLE State CT Zip Code 06039-2006

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.44**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

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

Mailing Address 105 CHAPIN ROAD

City NEW MILFORD State CT Zip Code 06776-2656

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

Name of Employer STATE OF CT Occupation LEGISLATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2011

**Transaction ID : SA11.14**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address 58 SCARBOROUGH STREET

City HARTFORD State CT Zip Code 06105-1105

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.80**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL H. CICCETTI ESQ.**

Mailing Address **8 HUTCHINSON PARKWAY**

City **LITCHFIELD** State **CT** Zip Code **06759-2206**

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

Name of Employer **CHICCHETTI, TANSLEY & MCGRATH, LLP** Occupation **LAWYER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.145**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. LAURA T. CLEMINSHAW**

Mailing Address **P.O. BOX 389**

City **LITCHFIELD** State **CT** Zip Code **06759-0389**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.252**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **P.O. BOX 877**

City **SHARON** State **CT** Zip Code **06069-0877**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.55**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

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

**Transaction ID : SA11.197**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES C. COLLIAS M.D.**

Mailing Address **16 RILLBANK TERRACE**

City **WEST HARTFORD** State **CT** Zip Code **06107-1031**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.81**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **14 EAST 90TH ST**

City **NEW YORK** State **NY** Zip Code **10128-0671**

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

Name of Employer **ACK ASSET MANAGEMENT LLC** Occupation **INVESTMENT MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2011**

**Transaction ID : SA11.21**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 15 LEDYARD RD

City WEST HARTFORD State CT Zip Code 06117-1712

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2011

**Transaction ID : SA11.289**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address P.O. BOX 1857

City LITCHFIELD State CT Zip Code 06759-1857

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.240**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 1000 W. WASHINGTON APT 545

City CHICAGO State IL Zip Code 60607

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

Name of Employer SRAM CORPORATION Occupation PROFIT SUCKING OVERHEAD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.359**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SARAH BRYANT DEAN**

Mailing Address **221 EAST SHORE ROAD**

City **MORRIS** State **CT** Zip Code **06763-1317**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : SA11.146**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **1 LAZYPBROOK ROAD**

City **SHELTON** State **CT** Zip Code **06484-3460**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11.447**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **360 STATE STREET  
SUITE 2501**

City **NEW HAVEN** State **CT** Zip Code **06510-3624**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.129**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HELEN MACDONALD DEGENER**

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

City SHARON State CT Zip Code 06069-2403

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

Name of Employer MAZAMA CAPITAL MGMT Occupation ADVISOR, DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.212**

Amount of Each Receipt this Period  
 CONTRIBUTION **500.00**

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

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

City SHARON State CT Zip Code 06069-2403

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

Name of Employer MAZAMA CAPITAL MGMT Occupation ADVISOR, DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2011

**Transaction ID : SA11.24**

Amount of Each Receipt this Period  
 CONTRIBUTION **250.00**

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

Mailing Address 100 PEARL ST 14TH FLOOR

City HARTFORD State CT Zip Code 06103-4500

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

Name of Employer SELF Occupation LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2011

**Transaction ID : SA11.286**

Amount of Each Receipt this Period  
 CONTRIBUTION **250.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

City LITCHFIELD State CT Zip Code 06759-0037

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

Name of Employer SELF Occupation COMMUNICATIONS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.148**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

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

Mailing Address 14 COLTON STREET

City FARMINGTON State CT Zip Code 06032-2329

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

Name of Employer L'ARC ARCHITECTS, LLC Occupation ARCHITECT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2011

**Transaction ID : SA11.83**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARGARET DOUGLAS-HAMILTON**

Mailing Address 137 SHARON ROAD

City LAKEVILLE State CT Zip Code 06039-2111

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.198**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JANE P. DOWLING**

Mailing Address **36 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**240.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11.438**

Amount of Each Receipt this Period  
**240.04**  
 CONTRIBUTION

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

Mailing Address **143 BALFOUR DR.**

City **WEST HARTFORD** State **CT** Zip Code **06117-2902**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.35**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **54 WESTWOOD ROAD**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.84**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**990.04**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VINCENT J. DOWLING JR.**

Mailing Address 54 LEDYARD

City WEST HARTFORD State CT Zip Code 06117-1708

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

Name of Employer DOWLING & PARTNERS Occupation MANAGING PARTNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.85**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VINCENT J. DOWLING JR.**

Mailing Address 54 LEDYARD

City WEST HARTFORD State CT Zip Code 06117-1708

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

Name of Employer DOWLING & PARTNERS Occupation MANAGING PARTNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.86**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VINCENT J. DOWLING JR.**

Mailing Address 54 LEDYARD

City WEST HARTFORD State CT Zip Code 06117-1708

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

Name of Employer DOWLING & PARTNERS Occupation MANAGING PARTNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.87**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

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

**7500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 59 GARRETT ROAD

City State Zip Code  
CANTON CT 06019

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

Name of Employer Occupation  
DUCCI ELECTRICAL CONTRACTORS INC ELECTRICIAL CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.354**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. EBERSOL**

Mailing Address 140 GREAT HILL RD

City State Zip Code  
LITCHFIELD CT 06759-4212

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

Name of Employer Occupation  
EBERSOL & MCCORMICK ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 30 2011

**Transaction ID : SA11.441**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 1845 TOWN CENTER BLVD SUITE 105

City State Zip Code  
ORANGE PARK FL 32003-3358

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

Name of Employer Occupation  
REINHOLD CORPORATION INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2011

**Transaction ID : SA11.326**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN J. EISENHAURE**

Mailing Address P.O. BOX 1659  
20 GOODHOUSE RD.

City LITCHFIELD State CT Zip Code 06759-1659

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

Name of Employer EIZIE LLC Occupation SELF

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11.257**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

City LITCHFIELD State CT Zip Code 06759-4109

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

Name of Employer FAHEY REALTORS Occupation REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11.256**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 102 NORTH STREET  
P.O. BOX 939

City LITCHFIELD State CT Zip Code 06759-2504

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

Name of Employer SELF Occupation INVESTING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.150**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 317 GOSHEN ROAD

City State Zip Code  
LITCHFIELD CT 06759-2404

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

**Transaction ID : SA11.322**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 30 NORTH STREET

City State Zip Code  
WATERTOWN CT 06795-2106

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

Name of Employer Occupation  
WATERTOWN LIBRARY LIBRARIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.130**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 36 NORTH STREET

City State Zip Code  
WATERTOWN CT 06795

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

Name of Employer Occupation  
CARMODY & TORRANCE LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.346**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **P.O. BOX 1325**

City **LITCHFIELD** State **CT** Zip Code **06759-1325**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.29**

Amount of Each Receipt this Period  
**350.00**  
 CONTRIBUTION

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

Mailing Address **128 WELDON COURT**

City **GOSHEN** State **CT** Zip Code **06756-1615**

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

Name of Employer **SELF** Occupation **OPTOMETRIST**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : SA11.151**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **139 SOUTH ST  
P.O. BOX 1478**

City **LITCHFIELD** State **CT** Zip Code **06759-4007**

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

Name of Employer **FISHER, FRANCE, TREE AND WATTS** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.250**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

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

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

**1650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 13 JUNIPER DR.

City LAKEVILLE State CT Zip Code 06039-2021

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

Name of Employer HOUSEWIFE Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.61**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 123 MEADOW ROAD

City RIVERSIDE State CT Zip Code 06878-2521

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

Name of Employer HOMEMAKER Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.43**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 123 MEADOW ROAD

City RIVERSIDE State CT Zip Code 06878-2521

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

Name of Employer STATE OF CONNECTICUT Occupation STATE SENATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11.454**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **70 LEMAY STREET**

City **WEST HARTFORD** State **CT** Zip Code **06107-3025**

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

Name of Employer **CHH** Occupation **HOSPITAL MANAGEMENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.152**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LOUIS A. FRIEDRICH**

Mailing Address **96 WALLSFORD DR.**

City **GOSHEN** State **CT** Zip Code **06756-1816**

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

Name of Employer **ALLIANCE BERNSTEIN** Occupation **FINANCIAL ADVISOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.246**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **159 WEST WOODS ROAD #1**

City **SHARON** State **CT** Zip Code **06069-2236**

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

Name of Employer **MERRILL LYNCH** Occupation **MONEY MGMT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.50**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. JOHN P. FULKERSON**

Mailing Address 176 CLARK RD

City LITCHFIELD State CT Zip Code 06759-2822

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

Name of Employer ORTHOPEDIC ASSOCIATION OF HARTFORD Occupation SURGEON

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.247**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address P.O. BOX 1106

City LITCHFIELD State CT Zip Code 06759-1106

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2011

**Transaction ID : SA11.307**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 163 CORNWALL HOLLOW ROAD

City WEST CORNWALL State CT Zip Code 06796-1621

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.242**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 31 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CAROLYN C. GALIETTE**  
 Mailing Address **34 VALLEY VIEW DRIVE**  
 City **AVON** State **CT** Zip Code **06001-2712**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **IRONWOOD CAPITAL** Occupation **INVESTMENT MANAGEMENT**  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**  
**Transaction ID : SA11.89**  
 Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MEREDITH MALLORY GEORGE**  
 Mailing Address **24 THREE WELLS LANE**  
 City **DARIEN** State **CT** Zip Code **06820-2606**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **N/A** Occupation **N/A**  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**  
**Transaction ID : SA11.448**  
 Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARGERY O. GERLI**  
 Mailing Address **252 EAST STREET**  
 City **SHARON** State **CT** Zip Code **06069-2419**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **SELF** Occupation **FARMER**  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 13 / 2011**  
**Transaction ID : SA11.199**  
 Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT J. GFELLER M.D.**

Mailing Address **10 BILTMORE PARK**

City **BLOOMFIELD** State **CT** Zip Code **06002-2141**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.90**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **P.O. BOX 591**  
**P.O. BOX 591**

City **LITCHFIELD** State **CT** Zip Code **06759-0591**

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

Name of Employer **MARRIN SANTORE REALTY** Occupation **REALTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : SA11.156**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **23 BUTLER'S ISLAND**

City **DARIEN** State **CT** Zip Code **06820-6203**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.267**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1000.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.280**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **32 THREE WELLS ROAD**

City **DARIEN** State **CT** Zip Code **06820-2606**

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

Name of Employer **BMO CAPITAL MARKETS** Occupation **MANAGING DIRECTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

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

**Transaction ID : SA11.209**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **42 UPPER MAIN STREET**

City **SHARON** State **CT** Zip Code **06069-2008**

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

Name of Employer **GREY HOUSE PUBLISHING** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 21 / 2011**

**Transaction ID : SA11.325**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 1165 FIFTH AVE.

City NEW YORK State NY Zip Code 10029-6931

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.66**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address 117 W. HYERDALE DRIVE

City GOSHEN State CT Zip Code 06756-1700

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.153**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

Mailing Address 117 W. HYERDALE DRIVE

City GOSHEN State CT Zip Code 06756-1700

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.154**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NELSON GRIEBEL**

Mailing Address **7 CARYN LANE**

City **WEATOGUE** State **CT** Zip Code **06089-9784**

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

Name of Employer **METRO HARTFORD ALLIANCE** Occupation **PRESIDENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2011**

**Transaction ID : SA11.324**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address **231 ROMFORD RD.**

City **WASHINGTON DEPOT** State **CT** Zip Code **06794-1310**

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

Name of Employer **IRG** Occupation **CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.266**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address **162 HUTCHINSON PKWY  
P.O. BOX 573**

City **LITCHFIELD** State **CT** Zip Code **06759-2210**

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

Name of Employer **FAHEY ASSOCIATES** Occupation **REALTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.155**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EUNICE S. GROARK**

Mailing Address 35 SADDLE RIDGE DRIVE

City BLOOMFIELD State CT Zip Code 06002

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.91**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASHBEL G. GULLIVER JR.**

Mailing Address 3120 N. HIGHWAY AIA  
UNIT 1303 S

City FORT PIERCE State FL Zip Code 34949

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.157**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

City LITCHFIELD State CT Zip Code 06759-0096

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.405**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **11 EAST MAIN STREET**

City **SALISBURY** State **CT** Zip Code **06068-1820**

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

Name of Employer **HARNEY TEA** Occupation **TEA BLENDER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.65**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **30 WASHNEE HTS  
P.O. BOX629**

City **SALISBURY** State **CT** Zip Code **06068-1613**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.70**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **P.O. BOX 1585  
P.O. BOX 1585**

City **LITCHFIELD** State **CT** Zip Code **06759-1585**

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

Name of Employer **NOVENS** Occupation **ADMINISTRATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : SA11.176**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BEVERLY M. HAVERTY**

Mailing Address **2 CINNAMON RIDGE**

City **FARMINGTON** State **CT** Zip Code **06032-2063**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.94**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **54 WESTWOOD**

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

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

Name of Employer **KEEFE, BRUYETTE AND WOODS** Occupation **SR. VP**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

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

**Transaction ID : SA11.398**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address **198 BENTON ROAD**  
**P.O. BOX 358**

City **MORRIS** State **CT** Zip Code **06763-1825**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.239**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **14 WEBER ROAD**

City **SHARON** State **CT** Zip Code **06069-2213**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.47**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address **5417 BARRISTER PLACE**

City **ALEXANDRIA** State **VA** Zip Code **22304**

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

Name of Employer **OXFORD FINANCE LLC** Occupation **GENERAL COUNSEL**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : SA11.356**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **P.O. BOX 709**

City **HILLSDALE** State **NY** Zip Code **12529-0709**

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

Name of Employer **ED HARRINGTON, INC.** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : SA11.200**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN HETHERINGTON**

Mailing Address 697 VALLEY ROAD

City State Zip Code  
NEW CANAAN CT 06840-3334

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

Name of Employer Occupation  
STATE OF CT LEGISLTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.310**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 18 WESTOVER LANE  
P.O. BOX 940

City State Zip Code  
LITCHFIELD CT 06759-3923

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

Name of Employer Occupation  
LITCHFIELD FORD PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.158**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 32 WINDY RIDGE ROAD

City State Zip Code  
SHARON CT 06069

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

Name of Employer Occupation  
SPORT ILLUSTRATED WRITER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2011

**Transaction ID : SA11.64**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 155 EAST 72

City NEW YORK State NY Zip Code 10021-4371

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

Name of Employer STONE RUN CAPITAL LLC Occupation INVESTMENT MANAGEMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.38**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

Mailing Address 42 PILGRIM ROAD

City WEST HARTFORD State CT Zip Code 06117-2242

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.96**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KATHERINE P. HOLDEN M.D.**

Mailing Address P.O. BOX 1749

City SHARON State CT Zip Code 06069-1749

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

Name of Employer SELF Occupation PEDIATRICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.201**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 84 GARNET ROAD

City ROXBURY State CT Zip Code 06783-2033

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

Name of Employer ERICSON INSURANCE Occupation INSURANCE AGENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.253**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 177 SABBADAY LANE

City WASHINGTON DEPOT State CT Zip Code 06794-1221

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

Name of Employer 1IRONWOOD PARTNERS Occupation INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.413**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

Mailing Address 177 SABBADAY LANE

City WASHINGTON DEPOT State CT Zip Code 06794-1221

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

Name of Employer 1IRONWOOD PARTNERS Occupation INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.414**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL C. JACKSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address 177 SABBADAY LANE		<b>Transaction ID : SA11.415</b>
City WASHINGTON DEPOT	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer IRONWOOD PARTNERS	Occupation INVESTOR	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 7500.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN E. JANCO SR.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011
Mailing Address 213 ALLISON DRIVE		<b>Transaction ID : SA11.159</b>
City TORRINGTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer TORRINGTON SAVINGS BANK	Occupation BANK OFFICER	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. KATHY K. JORGENSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011
Mailing Address P.O. BOX 91 P.O. BOX 91		<b>Transaction ID : SA11.160</b>
City GOSHEN	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer STITCHES LLC	Occupation OWNER	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH M. JUHAS**

Mailing Address P.O. BOX 1578

City LITCHFIELD State CT Zip Code 06759-1578

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SA11.235**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 175  
P.O. BOX 175

City LITCHFIELD State CT Zip Code 06759-0175

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

Name of Employer WEST STREET GRILL Occupation OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.161**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 134 NORTH STREET  
P.O. BOX 1021

City LITCHFIELD State CT Zip Code 06759-2504

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

Name of Employer SELF Occupation PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.162**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA C. KEADY**

Mailing Address **6 RAINBOW CIRCLE**

City **DARIEN** State **CT** Zip Code **06820-4814**

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

Name of Employer **KNIGHT CAPITAL CERES PARTNERS** Occupation **SALES**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.271**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

City **LITCHFIELD** State **CT** Zip Code **06759-0234**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

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

**Transaction ID : SA11.163**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **411 N. LAKE STREET**  
**P.O. BOX 1194**

City **LITCHFIELD** State **CT** Zip Code **06759-2420**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.214**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 83 BELGO ROAD

City LAKEVILLE State CT Zip Code 06039

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

Name of Employer BICRON ELECTRONICS Occupation RETIRING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.341**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 516 36TH AVE E.

City SEATTLE State WA Zip Code 98112-4223

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2011

**Transaction ID : SA11.323**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address TYLER LAKE  
P.O.BOX 220

City GOSHEN State CT Zip Code 06756-0220

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.164**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL J. KNIERIM**

Mailing Address **97 HEDGEHOG LANE**

City **WEST SIMSBURY** State **CT** Zip Code **06092-2106**

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

Name of Employer **STATE OF CONNECTICUT** Occupation **ADMINISTRATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.97**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **10 SCHUYLER LANE**

City **BLOOMFIELD** State **CT** Zip Code **06002-1534**

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

Name of Employer **CAROL KOHN INTERIORS** Occupation **INTERIOR DESIGNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.98**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL H. KRAUT**

Mailing Address **163 BEACH STREET**

City **LITCHFIELD** State **CT** Zip Code **06759-2310**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.261**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LAWRENCE B. KURLAND**

Mailing Address 196 EAST STREET

City SHARON State CT Zip Code 06069-2416

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

Name of Employer LAWRENCE B. KURLAND Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

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

**Transaction ID : SA11.202**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address 196 EAST STREET

City SHARON State CT Zip Code 06069-2416

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

Name of Employer LAWRENCE B. KURLAND Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2011

**Transaction ID : SA11.318**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address 208 WELLSFORD DRIVE

City GOSHEN State CT Zip Code 06756-1903

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

Name of Employer TORRINGTON SAVINGS BANK Occupation BANKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.165**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1750.00**



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

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

FOR LINE NUMBER: PAGE 49 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES LAMOND**  
 Mailing Address 33 WEST STREET  
 P.O. BOX 986  
 City LITCHFIELD State CT Zip Code 06759-3501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FABRIC STUDIO Occupation OWNER  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2011  
**Transaction ID : SA11.254**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN LAVIERI**  
 Mailing Address HICKORY RIDGE P.O. BOX 202  
 City BARKHAMSTED State CT Zip Code 06063-0202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STERLING ENGINEERING Occupation PRESIDENT  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11.393**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN LAVIERI**  
 Mailing Address HICKORY RIDGE P.O. BOX 202  
 City BARKHAMSTED State CT Zip Code 06063-0202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STERLING ENGINEERING Occupation PRESIDENT  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 30 / 2011  
**Transaction ID : SA11.442**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 29 LEDYARD ROAD

City WEST HARTFORD State CT Zip Code 06117-1712

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

Name of Employer CMG Occupation PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.99**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 66 HOYT LANE

City GUILFORD State CT Zip Code 06437

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

Name of Employer LETIZIA, AMBROSA & FALLS PC Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.361**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 130 NOB HILL ROAD

City CHESHIRE State CT Zip Code 06410

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

Name of Employer RESOURCES MANAGEMENT CORP Occupation INVESTMENT ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.347**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 119 WOODCHUCK LANE

City HARWINTON State CT Zip Code 06791-1512

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.166**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 36 HINKLE RD.

City WASHINGTON State CT Zip Code 06793-1001

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2011

**Transaction ID : SA11.262**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 65 E. CHESTNUT HILL ROAD

City LITCHFIELD State CT Zip Code 06759-4120

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

Name of Employer NORTHWEST ENT SPEC Occupation PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.167**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 52 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. EMILY SUE LYNCH**

Mailing Address 104 EAST STREET

City SHARON State CT Zip Code 06069-2414

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2011

**Transaction ID : SA11.309**

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

CONTRIBUTION

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

Mailing Address 80 EAST STREET  
P.O. BOX 502

City SHARON State CT Zip Code 06069-2414

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

Name of Employer GUION STEVENS RYBAK Occupation LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 31 / 2011

**Transaction ID : SA11.9**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA B. MACDONALD**

Mailing Address 24 PROSPECT ST

City LITCHFIELD State CT Zip Code 06759-2502

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.245**

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

CONTRIBUTION

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

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

\_\_\_\_\_ 1500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>WILLIAM J. MARCHAND</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011	
Mailing Address 160 CAULFIELD ROAD		<b>Transaction ID : SA11.168</b>	
City TORRINGTON	State CT	Zip Code 06790-2101	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation N/A		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>PALMER D. MARRIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011	
Mailing Address 199 E. LITCHFIELD ROAD P.O. BOX 804		<b>Transaction ID : SA11.169</b>	
City LITCHFIELD	State CT	Zip Code 06759-3001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer SELF	Occupation SALES		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>JEFFREY G. MARSTED</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2011	
Mailing Address 125 INDIAN HILL ROAD		<b>Transaction ID : SA11.39</b>	
City CANTON	State CT	Zip Code 06019-3624	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer BRADLEY, FOSTER, SARGENT	Occupation INVESTMENTS		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY R. MARTIN**

Mailing Address P.O. BOX 1404  
P.O. BOX 1404

City WASHINGTON State CT Zip Code 06793-0404

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.122**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 636 EAST MAIN STREET

City TORRINGTON State CT Zip Code 06790-5609

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

Name of Employer CHARLOTTE HUNGERFORD Occupation ADMINISTRATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.394**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 78 HART ROAD

City GUILFORD State CT Zip Code 06437-1128

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2011

**Transaction ID : SA11.100**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 55 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 245 ALVORD PARK ROAD

City State Zip Code  
TORRINGTON CT 06790-3493

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

Name of Employer Occupation  
LITCHFIELD HILLS ORTHOPEDICS M.D.

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.171**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 73 BALDWIN HILL ROAD  
P.O. BOX 1562

City State Zip Code  
LITCHFIELD CT 06759-3305

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

Name of Employer Occupation  
CHH DOCTOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.172**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 40 ARROWHEAD WAY

City State Zip Code  
DARIEN CT 06820-5505

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

Name of Employer Occupation  
PROLOGUE CAPITAL LP TRADER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.314**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE S. MCKENNA**

Mailing Address **66 WESTMONT**

City **WEST HARTFORD** State **CT** Zip Code **06117-2927**

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

Name of Employer **SELF** Occupation **INSURANCE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2011**

**Transaction ID : SA11.101**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. ANN M. MCKINNEY**

Mailing Address **37 SAWMILL ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-2001**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 19 / 2011**

**Transaction ID : SA11.302**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **986 S. PINE CREEK**  
**986 S. PINE CREEK**

City **FAIRFIELD** State **CT** Zip Code **06824-6348**

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

Name of Employer **STATE OF CONNECTICUT** Occupation **STATE SENATOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11.400**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1550.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES L. MERSFELDER**

Mailing Address 11 WOODALE CT

City State Zip Code  
GOSHEN CT 06756-2105

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

Name of Employer Occupation  
LEPERQ ,INC STRAREGIC CONSULTING

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.375**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 62 NORTH STREET  
P.O. BOX 1227

City State Zip Code  
LITCHFIELD CT 06759-2504

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

Name of Employer Occupation  
O & G INDUSTRIES SECRETARY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.173**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address COBBLE POND ROAD  
P.O. BOX 728

City State Zip Code  
SHARON CT 06069-0728

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

Name of Employer Occupation  
SELF INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11.203**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **COBBLE POND ROAD**  
**P.O. BOX 728**

City **SHARON** State **CT** Zip Code **06069-0728**

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

Name of Employer **SELF** Occupation **INVESTOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 21 / 2011**

**Transaction ID : SA11.319**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

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

Mailing Address **20 NETTLETON HOLLOW ROAD**

City **WASHINGTON** State **CT** Zip Code **06793-1107**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

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

**Transaction ID : SA11.123**

Amount of Each Receipt this Period  
**400.00**  
 CONTRIBUTION

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

Mailing Address **128 SEELEY ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-4208**

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

Name of Employer **SCHULTZ & COMPANY** Occupation **INVESTMENT ADVISOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : SA11.194**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**2650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. EDWINA S. MILLINGTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2011	
Mailing Address 49 KINNEY HILL ROAD		<b>Transaction ID : SA11.124</b>	
City NEW PRESTON	State CT	Zip Code 06777-1809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer N/A	Occupation HOMEMAKER		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. ALPHONSE W. MILO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 129 ALLISON DR.		<b>Transaction ID : SA11.350</b>	
City TORRINGTON	State CT	Zip Code 06790	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer GLORIA'S APPLE HOUSE	Occupation SELF EMPLOYED COMMUNITY SMALL BUSI		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. JOHN MINDEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2011	
Mailing Address 741 WASHINGTON ROAD		<b>Transaction ID : SA11.16</b>	
City WOODBURY	State CT	Zip Code 06798-1522	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer GAYNOR MINDEN, INC.	Occupation EXECUTIVE		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 164 WIGWAM ROAD

City LITCHFIELD State CT Zip Code 06759-3827

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

Name of Employer LAUREL RIDGE FARM Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11.174**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 164 WIGWAM ROAD

City LITCHFIELD State CT Zip Code 06759-3827

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

Name of Employer LAUREL RIDGE FARM Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11.337**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 1240  
P.O. BOX 1240

City LITCHFIELD State CT Zip Code 06759-1240

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

Name of Employer HOMEMAKER Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.175**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address P.O. BOX 1585  
P.O. BOX 1585

City LITCHFIELD State CT Zip Code 06759-1585

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

Name of Employer NOVENS INC Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.177**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD J. MURPHY JR.**

Mailing Address 385 SOUTH STREET

City LITCHFIELD State CT Zip Code 06759-4009

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

Name of Employer E.J. MURPHY REALTY Occupation REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.178**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 2700 TORRINGFORD STREET

City TORRINGTON State CT Zip Code 06790-2313

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.464**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

City **NEW YORK** State **NY** Zip Code **10175-0003**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : SA11.180**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **159 WEST WOODS ROAD #1**

City **SHARON** State **CT** Zip Code **06069-2236**

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

Name of Employer **FT BROWNE DRUG** Occupation **EXCUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

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

**Transaction ID : SA11.195**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **159 WEST WOODS ROAD #1**

City **SHARON** State **CT** Zip Code **06069-2236**

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

Name of Employer **FT BROWNE DRUG** Occupation **EXCUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.51**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>WILLIAM H. NICKERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2011	
Mailing Address 35 QUAIL ROAD		<b>Transaction ID : SA11.445</b>	
City GREENWICH	State CT	Zip Code 06831-3322	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED		Occupation N/A	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>JOSE W. NOYES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2011	
Mailing Address 12 HERB ROAD		<b>Transaction ID : SA11.71</b>	
City SHARON	State CT	Zip Code 06069-2326	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer N/A		Occupation N/A	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>KATHLEEN O' CONNOR</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011	
Mailing Address 30 WESTWOOD ROAD		<b>Transaction ID : SA11.104</b>	
City WEST HARTFORD	State CT	Zip Code 06117-2252	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer MCKENNA LONG & ALDRIDGE		Occupation ATTORNEY	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN F. O'CONNELL JR.**

Mailing Address 536 SIMSBURY ROAD

City State Zip Code  
BLOOMFIELD CT 06002-1535

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

Name of Employer Occupation  
CM SMITH AGENCY, INC. PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2011

**Transaction ID : SA11.103**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 245 RACE STREET

City State Zip Code  
DENVER CO 80206-4610

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

Name of Employer Occupation  
NONE MOM

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2011

**Transaction ID : SA11.26**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 24 EAST CHESTNUT HILL

City State Zip Code  
LITCHFIELD CT 06759-4118

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

Name of Employer Occupation  
HOMEMAKER N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11.183**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

2500.00



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

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

FOR LINE NUMBER: PAGE 65 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CYNTHIA J. ONEGLIA**

Mailing Address 138 BALDWIN HILL ROAD

City WASHINGTON DEPOT State CT Zip Code 06794-1002

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

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

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.125**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 24 EAST CHESTNUT HILL

City LITCHFIELD State CT Zip Code 06759-4118

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

Name of Employer Occupation  
O & G INDUSTRIES CONTRACTOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11.182**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS IRENE M. ONEGLIA**

Mailing Address 37 TALMADGE LANE  
P.O. BOX 1114

City LITCHFIELD State CT Zip Code 06759-2418

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11.274**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **11 MILLAY COURT**

City **LITCHFIELD** State **CT** Zip Code **06759-3316**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : SA11.181**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **112 WALL STREET**

City **TORRINGTON** State **CT** Zip Code **06790-5416**

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

Name of Employer **O & G** Occupation **CONSTRUCTION EXEC.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.236**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

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

Mailing Address **112 WALL STREET**

City **TORRINGTON** State **CT** Zip Code **06790-5416**

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

Name of Employer **O & G** Occupation **CONSTRUCTION EXEC.**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

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

**Transaction ID : SA11.236B**

Amount of Each Receipt this Period  
**-2500.00**  
 CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO PRIMARY**

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

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

**5250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 112 WALL STREET

City State Zip Code  
TORRINGTON CT 06790-5416

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

Name of Employer Occupation  
O & G CONSTRUCTION EXEC.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11.485**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM CONVENTION

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

Mailing Address 153 GALLOWS LANE  
P.O. BOX 519

City State Zip Code  
LITCHFIELD CT 06759-3918

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

Name of Employer Occupation  
BURLINGTON CONSTRUCTION CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 15 2011

**Transaction ID : SA11.275**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 742 RIDGEFIELD ROAD

City State Zip Code  
WILTON CT 06897-1415

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 19 2011

**Transaction ID : SA11.311**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **232 MELINS ROAD**

City **WARREN** State **CT** Zip Code **07654**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

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

**Transaction ID : SA11.392**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **262 BEACH STREET**  
**P.O. BOX 1461**

City **LITCHFIELD** State **CT** Zip Code **06759-2328**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.42**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **348 NORFOLK ROAD**

City **LITCHFIELD** State **CT** Zip Code **06759-2517**

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

Name of Employer **CESCO STEEL** Occupation **EXECUTIVE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 15 / 2011**

**Transaction ID : SA11.276**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address P.O. BOX 1566

City LAKEVILLE State CT Zip Code 06039-1566

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.62**

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

CONTRIBUTION

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

Mailing Address 5 CONBOY HEIGHTS

City KENT State CT Zip Code 06757-1427

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

Name of Employer SELF Occupation SELF-EMPLOYED

Receipt For: 2012  
 Primary  General  
 Other (specify)

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.48**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

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

Mailing Address 131 SHARON MOUNTAIN ROAD  
P.O. BOX 292

City SHARON State CT Zip Code 06069-2406

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

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

**Transaction ID : SA11.204**

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

CONTRIBUTION

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

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

\_\_\_\_\_ 1500.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 70 OF 113  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARTHA PHILLIPS**

Mailing Address P.O. BOX 1542

City LITCHFIELD State CT Zip Code 06759-1542

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.238**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 36 DUDLEY ROAD

City LITCHFIELD State CT Zip Code 06759-3108

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.184**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 12 ALEXANDRIA DRIVE

City BARKHAMSTED State CT Zip Code 06063-3436

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.185**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 71 OF 113  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES PRESTON**

Mailing Address P.O. BOX 803

City State Zip Code  
LITCHFIELD CT 06759-0803

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 15 2011

**Transaction ID : SA11.258**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

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

Mailing Address P.O. BOX 803

City State Zip Code  
LITCHFIELD CT 06759-0803

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 19 2011

**Transaction ID : SA11.258B**

Amount of Each Receipt this Period  
-2500.00  
CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

Mailing Address P.O. BOX 803

City State Zip Code  
LITCHFIELD CT 06759-0803

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

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 19 2011

**Transaction ID : SA11.316**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM CONVENTION**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BARCLAY W. PRINDLE**

Mailing Address **22 WEST MAIN STREET**

City **SHARON** State **CT** Zip Code **06069-2011**

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

Name of Employer **PRINDLE INSURANCE AGENCY** Occupation **INSURANCE AGENT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.45**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

Mailing Address **119 BRYNMOOR CT**

City **GOSHEN** State **CT** Zip Code **06756-2135**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

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

**Transaction ID : SA11.186**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

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

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

City **SHARON** State **CT** Zip Code **06069-2008**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.59**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

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

**1550.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID BARRETT RICH**

Mailing Address 202 FARNUM ROAD

City LAKEVILLE State CT Zip Code 06039-2509

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

Name of Employer SUPPORTIVE HOUSING WORKS Occupation HOMELESS PROVIDER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.205**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 3991 MACARTHUR BLVD

City NEWPORT BEACH State CA Zip Code 92660-3009

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

Name of Employer NGEN PARTNERS Occupation MANAGING DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.408**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 37 SUNSET FARM ROAD

City WEST HARTFORD State CT Zip Code 06107-1313

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

Name of Employer FINEC CORP Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.54**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **3 HYERDALE COURT**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

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

**Transaction ID : SA11.379**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CLARENCE L. ROBERTS JR.**

Mailing Address **5 SHARON MOUNTAIN ROAD  
P.O. BOX 601**

City **SHARON** State **CT** Zip Code **06069-2405**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2011**

**Transaction ID : SA11.22**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES ROBERTSON JR.**

Mailing Address **54 OTIS DR.**

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

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 14 / 2011**

**Transaction ID : SA11.248**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4470.00

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

**Transaction ID : SA11.206**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4470.00

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

**Transaction ID : SA11.206B**

Amount of Each Receipt this Period  
-1970.00  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO PRIMARY

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

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

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4470.00

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

**Transaction ID : SA11.463**

Amount of Each Receipt this Period  
1970.00  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM CONVENTION

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 113  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

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

City SHARON State CT Zip Code 06069-1738

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4470.00

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

**Transaction ID : SA11.461**

Amount of Each Receipt this Period  
 2470.00  
 CONTRIBUTION

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

Mailing Address 211 NORTH SHORE ROAD

City WARREN State CT Zip Code 06777-1123

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.187**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 5 PHEASANAT LANE SPUR

City GREENWICH State CT Zip Code 06830

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

Name of Employer RUSSELL REYNOLDS ASSOCIATES Occupation SEARCH CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11.355**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

3220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 11 LILAC LANE

City SHARON State CT Zip Code 06069-2302

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.67**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer RORABACK & RORABACK Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2011

**Transaction ID : SA11.283**

Amount of Each Receipt this Period  
 7500.00  
 CONTRIBUTION

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer RORABACK & RORABACK Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2011

**Transaction ID : SA11.283B**

Amount of Each Receipt this Period  
 -2500.00  
 CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO PRIMARY

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES RORABACK**

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer RORABACK & RORABACK Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.480B**

Amount of Each Receipt this Period  
-2500.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer RORABACK & RORABACK Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.481**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM CONVENTION**

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer RORABACK & RORABACK Occupation ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.483**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM CONVENTION**

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

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

0.00

**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 79 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address P.O. BOX 96  
P.O. BOX 96

City State Zip Code  
GOSHEN CT 06756-0096

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

Name of Employer Occupation  
RORABACK & RORABACK LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.188**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 71 LITCHFIELD PONDS ROAD

City State Zip Code  
LITCHFIELD CT 06759-3310

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

Name of Employer Occupation  
RORABACK & RORABACK LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11.399**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City State Zip Code  
LITCHFIELD CT 06759-2408

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

Name of Employer Occupation  
HOUSEWIFE N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11.282**

Amount of Each Receipt this Period  
7500.00  
CONTRIBUTION

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MOLLY RORABACK**

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer HOUSEWIFE Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
12 / 19 / 2011

**Transaction ID : SA11.282B**

Amount of Each Receipt this Period  
-2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO PRIMARY

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer HOUSEWIFE Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
12 / 19 / 2011

**Transaction ID : SA11.298B**

Amount of Each Receipt this Period  
-2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer HOUSEWIFE Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
12 / 19 / 2011

**Transaction ID : SA11.299**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM CONVENTION

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

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

0.00



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

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

FOR LINE NUMBER: PAGE 81 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MOLLY RORABACK**

Mailing Address 608 GOSHEN ROAD  
P.O. BOX 223

City LITCHFIELD State CT Zip Code 06759-2408

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

Name of Employer HOUSEWIFE Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2011

**Transaction ID : SA11.301**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM CONVENTION

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

Mailing Address 535 LAKE AVENUE

City GREENWICH State CT Zip Code 06830-3831

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

Name of Employer N/A Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11.211**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 79 BALFOUR DRIVE

City WEST HARTFORD State CT Zip Code 06117-2936

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

Name of Employer MAX RESTAURANT GROUP Occupation OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2011

**Transaction ID : SA11.107**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. TERRANCE W. RYAN**

Mailing Address 19 MINERVA LANE

City LITCHFIELD State CT Zip Code 06759-2518

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

Name of Employer PRO HEALTH PHYSICIANS Occupation PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.231**

Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

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

Mailing Address P.O. BOX 245

City LITCHFIELD State CT Zip Code 06759-0245

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.234**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 25 COLONY ROAD

City WEST HARTFORD State CT Zip Code 06117-2215

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.108**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1800.00

**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 83 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address **14 STONEBRIDGE LANE**

City **WEST HARTFORD** State **CT** Zip Code **06107-1541**

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

Name of Employer **BRADLEY, FOSTER & SARGENT** Occupation **MONEY MGMT**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2011**

**Transaction ID : SA11.20**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **SOUTH ROAD**

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

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

Name of Employer **WAND PARTNERS INC.** Occupation **PRIVATE EQUITY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11.444**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address **CORNWALL BRIDGE ROAD  
P.O. 787**

City **SHARON** State **CT** Zip Code **06068**

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

Name of Employer **PNH** Occupation **PHYSICIAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 26 / 2011**

**Transaction ID : SA11.46**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

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

Mailing Address 42 WESTWOOD RD

City WEST HARTFORD State CT Zip Code 06117-2252

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

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.111**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALLYN SEYMOUR JR.**

Mailing Address 42 WESTWOOD RD

City WEST HARTFORD State CT Zip Code 06117-2252

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2011

**Transaction ID : SA11.8**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALLYN SEYMOUR SR.**

Mailing Address 73 LEDYARD ROAD

City WEST HARTFORD State CT Zip Code 06117-1706

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.110**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN ELY SEYMOUR**

Mailing Address 35 LEDYARD ROAD

City WEST HARTFORD State CT Zip Code 06117-1712

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11.406**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS L. SEYMOUR**

Mailing Address 62 COLONY ROAD

City WEST HARTFORD State CT Zip Code 06117-2216

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.112**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LYNNE C. SHERMAN**

Mailing Address 154 OLD SOUTH ROAD

City LITCHFIELD State CT Zip Code 06759-4003

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : SA11.189**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL SHERR**

Mailing Address 19 COOK STREET

City State Zip Code  
WASHINGTON DEPOT CT 06794-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
VALASSIS EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SA11.215**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN SIMCHAK**

Mailing Address 12469 MONTEREY CIRCLE

City State Zip Code  
BLUE RIDGE SUMMIT PA 17214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
COALITION OF SERVICE INDUSTRIES GOVERNMENT RELATIONS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : SA11.349**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARK C. SINATRO**

Mailing Address 7 STONER DRIVE  
62 LASALLE RD. STE 204

City State Zip Code  
WEST HARTFORD CT 06107-1330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF EMPLOYED INSURANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2011

**Transaction ID : SA11.113**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 113  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TREY L. SINATRO**

Mailing Address 12 MIDLANDS DRIVE

City WEST HARTFORD State CT Zip Code 06107-1022

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SALES

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.114**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROGER K. SMITH**

Mailing Address 2 LEDGEWOOD ROAD

City WINCHESTER State MA Zip Code 01890-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer SOURCE AUDIO Occupation EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.41**

Amount of Each Receipt this Period  
 7500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROGER K. SMITH**

Mailing Address 2 LEDGEWOOD ROAD

City WINCHESTER State MA Zip Code 01890-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer SOURCE AUDIO Occupation EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11.41B**

Amount of Each Receipt this Period  
 -2500.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO PRIMARY

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>ROGER K. SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address <b>2 LEDGEWOOD ROAD</b>		<b>Transaction ID : SA11.457B</b>	
City <b>WINCHESTER</b>	State <b>MA</b>	Zip Code <b>01890-3121</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ -2500.00	
Name of Employer <b>SOURCE AUDIO</b>	Occupation <b>EXECUTIVE</b>		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 7500.00		
		<b>[MEMO ITEM]</b> REDESIGNATION TO GENERAL	

Full Name (Last, First, Middle Initial) <b>ROGER K. SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address <b>2 LEDGEWOOD ROAD</b>		<b>Transaction ID : SA11.458</b>	
City <b>WINCHESTER</b>	State <b>MA</b>	Zip Code <b>01890-3121</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 2500.00	
Name of Employer <b>SOURCE AUDIO</b>	Occupation <b>EXECUTIVE</b>		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 7500.00		
		<b>[MEMO ITEM]</b> REDESIGNATION FROM CONVENTION	

Full Name (Last, First, Middle Initial) <b>ROGER K. SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address <b>2 LEDGEWOOD ROAD</b>		<b>Transaction ID : SA11.460</b>	
City <b>WINCHESTER</b>	State <b>MA</b>	Zip Code <b>01890-3121</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 2500.00	
Name of Employer <b>SOURCE AUDIO</b>	Occupation <b>EXECUTIVE</b>		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 7500.00		
		<b>[MEMO ITEM]</b> REDESIGNATION FROM CONVENTION	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN SOCOLOF**

Mailing Address **15 WESTMINSTER ROAD**

City **SUMMIT** State **NJ** Zip Code **07901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEW VENTURE PARTNERS** Occupation **VENTURE CAPITAL**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2011**

**Transaction ID : SA11.343**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELIZABETH T. SOLLENBERGER**

Mailing Address **321 SEABURY DR.**

City **BLOOMFIELD** State **CT** Zip Code **06002-2654**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFFC**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2011**

**Transaction ID : SA11.486**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NICHOLAS N. SOLLEY**

Mailing Address **17 JUDEA CEMETERY ROAD**

City **WASHINGTON** State **CT** Zip Code **06793-1506**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 12 / 2011**

**Transaction ID : SA11.126**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT T. SOLLENBERGER**

Mailing Address P.O. Box 25480

City State Zip Code  
SILVERTHRONE CO 80497

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 30 2011

**Transaction ID : SA11.450**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CLAYTON BLANCHARD SPENCER**

Mailing Address 219 CHESTNUT HILL RD

City State Zip Code  
LITCHFIELD CT 06759-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 14 2011

**Transaction ID : SA11.244**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LANE D. SPERO**

Mailing Address 32 HOFFMAN ROAD

City State Zip Code  
CANTON CT 06019-2123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHOA PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 15 2011

**Transaction ID : SA11.285**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>MRS. GAIL P. SPERRY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2011
Mailing Address P.O. BOX 1342		<b>Transaction ID : SA11.263</b>
City LITCHFIELD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation N/A	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>MR. FRANK JARED SPROLE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2011
Mailing Address 16 TRAILS END		<b>Transaction ID : SA11.312</b>
City WILTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer LTF	Occupation BUSINESS/FINANCE	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 2962.62	

Full Name (Last, First, Middle Initial) <b>MR. FRANK JARED SPROLE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2011
Mailing Address 16 TRAILS END		<b>Transaction ID : SA11.312B</b>
City WILTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -462.62
Name of Employer LTF	Occupation BUSINESS/FINANCE	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 2962.62	<b>[MEMO ITEM]</b> REDESIGNATION TO PRIMARY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANK JARED SPROLE**

Mailing Address 16 TRAILS END

City: WILTON State: CT Zip Code: 06897-3330

FEC ID number of contributing federal political committee: C

Name of Employer: LTF Occupation: BUSINESS/FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2962.62

Date of Receipt: 12 / 30 / 2011

**Transaction ID : SA11.490**

Amount of Each Receipt this Period: 462.62

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM CONVENTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANK JARED SPROLE**

Mailing Address 16 TRAILS END

City: WILTON State: CT Zip Code: 06897-3330

FEC ID number of contributing federal political committee: C

Name of Employer: LTF Occupation: BUSINESS/FINANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2962.62

Date of Receipt: 12 / 30 / 2011

**Transaction ID : SA11.435**

Amount of Each Receipt this Period: 462.62

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TARA STACOM**

Mailing Address P.O. BOX 37

City: LITCHFIELD State: CT Zip Code: 06759-0037

FEC ID number of contributing federal political committee: C

Name of Employer: CUSHMAN & WAKEFIELD Occupation: BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 12 / 12 / 2011

**Transaction ID : SA11.147**

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2962.62

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN H. STAUB**

Mailing Address 19 WOLCOTT ROAD

City LITCHFIELD State CT Zip Code 06759-3509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.27**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID STONER**

Mailing Address 183 MAPLE STREET

City LITCHFIELD State CT Zip Code 06759-3103

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2011

**Transaction ID : SA11.321**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN M. SUHANOVSKY**

Mailing Address 1712 TORRINGTON STREET

City TORRINGTON State CT Zip Code 06790

FEC ID number of contributing federal political committee. **C**

Name of Employer THE TORRINGTON WATER COMPANY Occupation EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2011

**Transaction ID : SA11.216**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>MARY M. TAVINO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2011
Mailing Address 68 SOUTH STREET P.O. BOX 1766		<b>Transaction ID : SA11.40</b>
City LITCHFIELD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HOUSEWIFE	Occupation N/A	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>STEVEN M. TEMKIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2011
Mailing Address 144 CHESTNUT HILL ROAD		<b>Transaction ID : SA11.53</b>
City TORRINGTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer T & M BUILDING	Occupation HOMEBUILDER	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>MS. ELLEN TILLOTSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address 1931 WEED ROAD		<b>Transaction ID : SA11.336</b>
City TORRINGTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation RETIRED	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANA SMISSET TOOMEY**

Mailing Address 375 WEST HYERDALE DRIVE

City State Zip Code  
GOSHEN CT 06756-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF SCULPTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : SA11.190**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANITA TORIZZO**

Mailing Address 4 GREEN ACRES ROAD

City State Zip Code  
HARWINTON CT 06791-1122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : SA11.191**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. HEATHER TURRI**

Mailing Address 33 WEST HYERDALE DR.

City State Zip Code  
GOSHEN CT 06756-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TURRI INC EXECUTIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 15 / 2011

**Transaction ID : SA11.259**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3750.00

**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 96 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN WYATT UHLEIN**

Mailing Address 19 SAW MILL ROAD

City State Zip Code  
LITCHFIELD CT 06759-2001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 10 / 2011

**Transaction ID : SA11.23**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NANCY VAN DEUSEN**

Mailing Address 15 BELGO ROAD

City State Zip Code  
LAKEVILLE CT 06039-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : SA11.138**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD R. VIETOR**

Mailing Address 18 FAIRCHILD ROAD

City State Zip Code  
SHARON CT 06069-2437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2011

**Transaction ID : SA11.36**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MS. NANCY R. WADHAMS**

Mailing Address 533 OLD MIDDLE STREET

City State Zip Code  
GOSHEN CT 06756-2205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SA11.233**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELIOT WADSWORTH**

Mailing Address WHITE FLOWER FARM  
P.O. BOX 50

City State Zip Code  
LITCHFIELD CT 06759-0050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WHITE FLOWER FARM PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 26 / 2011

**Transaction ID : SA11.56**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CUYLER WALKER**

Mailing Address P.O. BOX 494

City State Zip Code  
UNIONVILLE PA 19375-0494

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PEPPER HAMILTON LLP ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 25 / 2011

**Transaction ID : SA11.4**

Amount of Each Receipt this Period  
2400.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5150.00

**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 98 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP S. WALKER**

Mailing Address 103 EMILY WAY

City WEST HARTFORD State CT Zip Code 06107-3154

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2011

**Transaction ID : SA11.117**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MARK WERTHEIM**

Mailing Address 19 WILLARD AVENUE

City MADISON State CT Zip Code 06443-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation BUSINESS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11.407**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID WICK**

Mailing Address 127 SOUTH STREET

City LITCHFIELD State CT Zip Code 06759

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : SA11.345**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ELAINE WITHERSPOON**

Mailing Address 90 CHESTNUT HILL ROAD

City LITCHFIELD State CT Zip Code 06759-4103

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2011

**Transaction ID : SA11.32**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELAINE WITHERSPOON**

Mailing Address 90 CHESTNUT HILL ROAD

City LITCHFIELD State CT Zip Code 06759-4103

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11.439**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TERRIE WOOD**

Mailing Address 150 SAINT NICHOLAS ROAD

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE OF CT Occupation REPRESENTATIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1462.62**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2011

**Transaction ID : SA11.313**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1600.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TERRIE WOOD**

Mailing Address 150 SAINT NICHOLAS ROAD

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE OF CT Occupation REPRESENTATIVE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1462.62

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : SA11.436**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 462.62

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. SUSAN WYPER**

Mailing Address 65 KNOLLWOOD LANE

City DARIEN State CT Zip Code 06820-2813

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2011

**Transaction ID : SA11.268**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 750.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAMES A. YOUNGLING**

Mailing Address P.O. BOX 456  
P.O. BOX 456

City LITCHFIELD State CT Zip Code 06759-0456

FEC ID number of contributing federal political committee. **C**

Name of Employer INDEPENDENT RESOURCES, INC Occupation OWNER/PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : SA11.193**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ 2212.62

\_\_\_\_\_

**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 101 OF 113
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>GERALD ZORDAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2011
Mailing Address P.O. BOX 926		<b>Transaction ID : SA11.28</b>
City TORRINGTON	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BORGESON UNIVERSAL	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>JULIE G. ZYLA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2011
Mailing Address 30 HICKORY LANE		<b>Transaction ID : SA11.118</b>
City WEST HARTFORD	State CT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CIGNA	Occupation MARKETING COMMUNICATIONS DIRECTOR	CONTRIBUTION
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	224785.28

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 113			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. JANE P. DOWLING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 36 WESTMONT		Amount of Each Disbursement this Period 240.04 <b>Transaction ID : SB17.438</b>
City WEST HARTFORD State CT Zip Code 06117-2927	Purpose of Disbursement IN-KIND CONTRIBUTION Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>B. ANNA-ELYSAPETH MCGUIRE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 49 ALLYNDALE ROAD		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D101</b>
City CANAAN State CT Zip Code 06018	Purpose of Disbursement TREASURER Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	TREASURER

Full Name (Last, First, Middle Initial) <b>C. MARY ROBERTSON</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address P.O. BOX 1738 28 JEWETT HILL RD.		Amount of Each Disbursement this Period 2470.00 <b>Transaction ID : SB17.461</b>
City SHARON State CT Zip Code 06069-1738	Purpose of Disbursement IN-KIND CONTRIBUTION Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5210.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 113			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANDREW RORABACK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address P.O. BOX 357		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.I4</b>
City GOSHEN	State CT	
Zip Code 06756	Purpose of Disbursement EVENT EXPENSE REIMBURSEMENT	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>B. MR. FRANK JARED SPROLE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011
Mailing Address 16 TRAILS END		Amount of Each Disbursement this Period 462.62 <b>Transaction ID : SB17.435</b>
City WILTON	State CT	
Zip Code 06897-3330	Purpose of Disbursement IN-KIND CONTRIBUTION	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>C. TAMARA TRAGAKISS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 100 HART DRIVE		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : SB17.I18</b>
City LITCHFIELD	State CT	
Zip Code 06759	Purpose of Disbursement FUNDRAISING SERVICES	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	842.62
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 113	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

**A. MR. TERRIE WOOD**

Full Name (Last, First, Middle Initial)  
Mailing Address 150 SAINT NICHOLAS ROAD

City DARIEN State CT Zip Code 06820

Purpose of Disbursement IN-KIND CONTRIBUTION Category/Type 007

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 12 / 30 / 2011

Amount of Each Disbursement this Period: 462.62

Transaction ID : SB17.436

**B. ADCOMM**

Full Name (Last, First, Middle Initial)  
Mailing Address ASHLEY FALLS ROAD

City CANAAN State CT Zip Code 06018

Purpose of Disbursement FUNDRAISING EXPENSE Category/Type 003

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 12 / 31 / 2011

Amount of Each Disbursement this Period: 289.00

Transaction ID : SB17.11

**C. ALIGN MEDIA LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 921 CAVALRY RIDE TRAIL

City AUSTIN State TX Zip Code 78732

Purpose of Disbursement WEB SITE SERVICES AND DESIGN Category/Type 003

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 12 / 06 / 2011

Amount of Each Disbursement this Period: 1033.13

Transaction ID : SB17.13

**SUBTOTAL** of Disbursements This Page (optional) ..... 1784.75

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 113	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. ATT MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2011
Mailing Address P.O. BOX 6463		Amount of Each Disbursement this Period 232.40 <b>Transaction ID : SB17.I5</b>
City CAROL STREAM	State IL	
Zip Code 60197-6463	Purpose of Disbursement TELEPHONE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>B. COMPUTER MARKETING SERVICES INC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 3 GEORGE WASHINGTON PLAZA STE 3		Amount of Each Disbursement this Period 90.40 <b>Transaction ID : SB17.I8</b>
City GAYLORDSVILLE	State CT	
Zip Code 06755	Purpose of Disbursement FUNDRAISING EXPENSE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>C. CRIMSON SOFTWARE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address 7704 LEESEBURG PIKE		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.I9</b>
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement FUNDRAISING SOFTWARE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1122.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 113			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. GHI SIGN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address ASHLEY FALLS ROAD		Amount of Each Disbursement this Period 138.26
City CANAAN State CT Zip Code 06018	Purpose of Disbursement PRINTING 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.I10</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>B. PIERCEZAPPI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address STE 108, 501 KINGS HWY EAST 501 KINGS HIGHWAY EAST		Amount of Each Disbursement this Period 5000.00
City FAIRFIELD State CT Zip Code 06825	Purpose of Disbursement FUNDRAISING CONSULTING FEE 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.I11</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 48.60
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement CREDIT CARD FEES 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.I12</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5186.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 113			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 15.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD FEES	<b>Transaction ID : SB17.I13</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	CREDIT CARD FEES
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 45.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD FEES	<b>Transaction ID : SB17.I14</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	CREDIT CARD FEES
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 144 2ND STREET		Amount of Each Disbursement this Period 939.76
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD FEES 11/1/2011 TO 12/31/2011	<b>Transaction ID : SB17.i20</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	CREDIT CARD FEES
State: District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 113			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 393.30 <b>Transaction ID : SB17.I15</b>
City THOMAS	State CT	
Zip Code 06787	Purpose of Disbursement PRINTING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>B. SIR SPEEDY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address P.O. BOX 517		Amount of Each Disbursement this Period 1321.24 <b>Transaction ID : SB17.I17</b>
City THOMAS	State CT	
Zip Code 06787	Purpose of Disbursement PRINTING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) <b>C. TORRINGTON SAVINGS BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2011
Mailing Address 129 MAIN STREET		Amount of Each Disbursement this Period 19.85 <b>Transaction ID : SB17.I19</b>
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement CHECK FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1734.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 113	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. TORRINGTON SAVINGS BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 129 MAIN STREET		Amount of Each Disbursement this Period 15.00
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement BANK FEE	<b>Transaction ID : SB17.I6</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. US POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address EAST ELM STREET		Amount of Each Disbursement this Period 49.79
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement POSTAGE	<b>Transaction ID : d102</b>
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	POSTAGE
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address EAST ELM STREET		Amount of Each Disbursement this Period 528.00
City TORRINGTON	State CT	
Zip Code 06790	Purpose of Disbursement POSTAGE	<b>Transaction ID : D103</b>
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	POSTAGE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	592.79
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 113	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Roraback for Congress**

Full Name (Last, First, Middle Initial) <b>A. US POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2011</b>
Mailing Address <b>EAST ELM STREET</b>		Amount of Each Disbursement this Period <b>264.00</b>
City <b>TORRINGTON</b> State <b>CT</b> Zip Code <b>06790</b>	Purpose of Disbursement <b>POSTAGE</b>	<b>Transaction ID : D104</b>
Candidate Name	Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	<b>POSTAGE</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>264.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>17738.76</b>

**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)

**Roraback for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Andrew Roraback**

Nature of Debt (Purpose):  
reimburse postage and printing

Mailing Address P.O. Box 357

City State Zip Code  
Goshen CT 06756

Outstanding Balance Beginning This Period

0.00

**Transaction ID : DE116**

Amount Incurred This Period

568.17

Payment This Period

0.00

Outstanding Balance at Close of This Period

568.17

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MARK DILLON**

Nature of Debt (Purpose):  
PRESS SERVICES - CONSULTANT

Mailing Address PARK AVENUE

City State Zip Code  
CANAAN CT 06018

Outstanding Balance Beginning This Period

0.00

**Transaction ID : DE107**

Amount Incurred This Period

300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Kara Dowling**

Nature of Debt (Purpose):  
event reimbursement

Mailing Address P.O. Box 357

City State Zip Code  
Goshen CT 06756

Outstanding Balance Beginning This Period

0.00

**Transaction ID : DE115**

Amount Incurred This Period

274.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

274.22

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1142.39

0.00

0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Roraback for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Align Media, LLC**

Nature of Debt (Purpose):  
Web Services

Mailing Address 921 Cavalry Ride Trail

City State Zip Code  
Austin TX 78732

Outstanding Balance Beginning This Period  
0.00

Transaction ID : de108

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
5780.00 0.00 5780.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Strategic Media Group**

Nature of Debt (Purpose):  
Consulting

Mailing Address 1210 North Taft Street, Suite 701

City State Zip Code  
Arlington VA 22201

Outstanding Balance Beginning This Period  
0.00

Transaction ID : DE110

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
3450.48 0.00 3450.48

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**AT&T Mobility**

Nature of Debt (Purpose):  
telephone services

Mailing Address P.O. Box 6463

City State Zip Code  
Carol Stream IL 60197

Outstanding Balance Beginning This Period  
0.00

Transaction ID : DE111

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
139.53 0.00 139.53

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

9370.01  
0.00  
0.00



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Roraback for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pierce Zappi</b>		Nature of Debt (Purpose): FR - Consulting
Mailing Address 501 Kings Highway East		
City	State	Zip Code
Fairfield	CT	06825

Outstanding Balance Beginning This Period	<b>Transaction ID : DE112</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
5569.87	0.00	5569.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	5569.87
2) <b>TOTALS</b> This Period (last page this line number only) .....	16082.27
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	16082.27