

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

12FE4M5

JOE WALSH FOR CONGRESS COMMITTEE, INC.

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

Check if different than previously reported. (ACC)

LAKE ZURICH

IL

60047

2. FEC IDENTIFICATION NUMBER

C C00473579

CITY

STATE

ZIP CODE

STATE DISTRICT

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

IL

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on M M / D D / Y Y Y Y in the State of

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

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period

07 / 01 / 2011 through 09 / 30 / 2011

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

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

Signature of Treasurer Helene M. Miller-Walsh

[Electronically Filed]

Date

08 / 15 / 2014

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

Table with 7 columns and 1 row for Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	156099.72	803188.20
(b) Total Contribution Refunds (from Line 20(d)) .....	10400.00	12850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	145699.72	790338.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	140636.47	343386.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	12930.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	140636.47	330455.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	466057.78	
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).....	44231.91	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

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

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	109576.00	491244.00
(ii) Unitemized.....	19523.72	51759.82
(iii) TOTAL of contributions from individuals ▶	129099.72	543003.82
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	27000.00	255184.38
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	156099.72	803188.20
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	19378.01
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	12930.50
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	7300.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	156099.72	842796.71

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	140636.47	343386.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	11900.00	21300.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	11900.00	21300.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	10400.00	10450.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10400.00	12850.00
21. OTHER DISBURSEMENTS .....	0.00	2421.70
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	162936.47	379957.70

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	472894.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	156099.72
25. SUBTOTAL (add Line 23 and Line 24).....	628994.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	162936.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	466057.78

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

Form/Schedule: F3A  
Transaction ID :

Amended to update donor information. All donors missing information have received requests indicating that the Committee is required to request and report the full name, mailing address, employer and occupation of all contributors whose contributions aggregate in excess of \$200 in a campaign cycle. The Committee will amend the report as further information is received.

Form/Schedule:  
Transaction ID:

**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 120
	<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)  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

Full Name (Last, First, Middle Initial) <b>A. Thomas Ahart</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 116 Timberwick Rd		<b>Transaction ID : SA11Al.18731</b>
City Stewartsville	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ahart, Frinzi & Smith	Occupation Insurance Agent	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Bonnie Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 1455 Macalpin Cr		<b>Transaction ID : SA11Al.18733</b>
City Inverness	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer SRI Technologies Inc.	Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Alger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2011
Mailing Address 7452 Foxfire Dr		<b>Transaction ID : SA11Al.18734</b>
City Crystal Lake	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NA	Occupation Housewife	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Mitchell Andrews</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 28 Hidden Brook Drive		<b>Transaction ID : SA11Al.18742</b>
City North Barrington	State IL	
Zip Code 60010		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Name of Employer The Plexus Groupe
Occupation Partner		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>B. Richard Bail</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 2222 N. Fremont Street		<b>Transaction ID : SA11Al.18757</b>
City Chicago	State IL	
Zip Code 60614		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Name of Employer Self-Employed
Occupation Business Consultant		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>C. Diane Bishop</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2011
Mailing Address 38837 N. Drexel Drive		<b>Transaction ID : SA11Al.18784</b>
City Antioch	State IL	
Zip Code 60002		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Name of Employer Self
Occupation Residential Appraiser		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00
Election Cycle-to-Date		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Joan Brenner**

Mailing Address 30 lakeview dr

City Lake Barrington State IL Zip Code 60010

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.18806**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 5515 N. Ridgewood Dr.

City Ringwood State IL Zip Code 60072

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.18825**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 10144 W Fairbanks

City Beach Park State IL Zip Code 60099

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

Name of Employer Occupation  
 Laserage Technology Corp 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  
 09 / 30 / 2011

**Transaction ID : SA11AI.18831**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00



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

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

FOR LINE NUMBER: PAGE 9 OF 120  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Carlton**

Mailing Address 1461 W. Longwood Dr.

City State Zip Code  
Bull Valley IL 60098

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2011

**Transaction ID : SA11AI.18833**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 21952 Pine Lake Cir

City State Zip Code  
Kildeer IL 60047

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

Name of Employer Occupation  
RJ Products 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  
 07 25 2011

**Transaction ID : SA11AI.18835**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 240 W. Lake St.

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Carter Financial 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  
 07 21 2011

**Transaction ID : SA11AI.18839**

Amount of Each Receipt this Period  
 500.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Brian G. Cunat**

Mailing Address 6202 Katamsi Tr.

City State Zip Code  
McHenry IL 60050

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

Name of Employer Occupation

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  
 07 / 11 / 2011

**Transaction ID : SA11AI.18880**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1280 Kuhn Road

City State Zip Code  
Carol Stream IL 60188

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

Name of Employer Occupation  
Rainbow Academy Small business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2011

**Transaction ID : SA11AI.18890**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 9 Lydia Court

City State Zip Code  
Hawthorn Woods IL 60047

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

Name of Employer Occupation  
G.A.S. Capital, Inc Chairman

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  
 09 / 30 / 2011

**Transaction ID : SA11AI.18907**

Amount of Each Receipt this Period  
2500.00

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

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

2800.00

**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Daniel Di Iorio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2011	
Mailing Address 23531 N. East Dr.		<b>Transaction ID : SA11AI.18904</b>	
City Barrington	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Advocate Good Shepard Hospital	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) <b>B. Richard Ditton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011	
Mailing Address 22199 W Thornridge Dr		<b>Transaction ID : SA11AI.18912</b>	
City Kildeer	State IL	Zip Code 60047-2969	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Incredible Technologies	Occupation Principle		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Rick H Doering</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011	
Mailing Address 26514 Southgate Trl		<b>Transaction ID : SA11AI.18913</b>	
City Barrington Hills	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Doering Lanscape Company	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dorothy Doumakes**

Mailing Address 99 Old Oak Rd.

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Bingman Precision Corp. Exec

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  
 07 / 11 / 2011

**Transaction ID : SA11Al.18927**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 990 North Lake Shore Drive, Unit 2

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Private Investor Private Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11Al.18935**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 62 southfield ave

City State Zip Code  
stamford CT 06902

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  
 09 / 30 / 2011

**Transaction ID : SA11Al.18939**

Amount of Each Receipt this Period  
2500.00

**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 13 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Gerald Forsythe**

Mailing Address 1765 S. Braymore Dr.

City Inverness	State IL	Zip Code 60090
-------------------	-------------	-------------------

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

Name of Employer Indeck Energy Services	Occupation CEO
--	-------------------

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  
 07 / 15 / 2011

**Transaction ID : SA11AI.18979**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1765 S. Braymore Dr.

City Inverness	State IL	Zip Code 60090
-------------------	-------------	-------------------

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

Name of Employer Indeck Energy Services	Occupation CEO
--	-------------------

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  
 09 / 06 / 2011

**Transaction ID : SA11AI.18980**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 418 E Juniper Dr

City Palatine	State IL	Zip Code 60074
------------------	-------------	-------------------

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

Name of Employer US Army	Occupation Microbiologist
-----------------------------	------------------------------

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  
 09 / 12 / 2011

**Transaction ID : SA11AI.19033**

Amount of Each Receipt this Period  
100.00

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

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

5100.00

**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mary E Graft**

Mailing Address 785 N Virn Allen Ct

City Palatine State IL Zip Code 60067

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

Name of Employer W.W. Grainger Occupation Adm.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.19043**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 6 Watergate Rd The Coves

City South Barrington State IL Zip Code 60010

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 06 / 2011

**Transaction ID : SA11AI.19044**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 6 Watergate Rd The Coves

City South Barrington State IL Zip Code 60010

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2011

**Transaction ID : SA11AI.19045**

Amount of Each Receipt this Period  
 200.00

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

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

2700.00

**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 100 Ravine Ln

City North Barrington State IL Zip Code 60010

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19053**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 502 North Hart Blvd.

City Harvard State IL Zip Code 60033

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

Name of Employer Occupation  
 Self Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19065**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 7532

City Gurnee State IL Zip Code 60031

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

Name of Employer Occupation  
 NA 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  
 08 / 15 / 2011

**Transaction ID : SA11AI.19078**

Amount of Each Receipt this Period  
 250.00

**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 16 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address **PO Box 7532**

City **Gurnee** State **IL** Zip Code **60031**

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

Name of Employer **NA** Occupation **Retired**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2011**

**Transaction ID : SA11AI.19079**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address **6000 Garlands In Suite 120**

City **Barrington** State **IL** Zip Code **60010**

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

Name of Employer **The Garlands** 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  
**07 / 18 / 2011**

**Transaction ID : SA11AI.19088**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **25550 N Tuscarora Ct**

City **Barrington** State **IL** Zip Code **60010**

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

Name of Employer **Hollister International** Occupation **CEO**

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  
**09 / 30 / 2011**

**Transaction ID : SA11AI.19089**

Amount of Each Receipt this Period  
**1500.00**

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

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

**1900.00**



**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Connie S. Herbert**

Mailing Address 25550 N. Tuscarora Ct.

City: Barrington State: IL Zip Code: 60010

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 09 / 30 / 2011

**Transaction ID : SA11AI.19090**

Amount of Each Receipt this Period: 1500.00

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

Mailing Address 600 S. Riverside Rd.

City: St. Joseph State: MO Zip Code: 64507

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

Name of Employer: Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 11 / 2011

**Transaction ID : SA11AI.19094**

Amount of Each Receipt this Period: 2500.00

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

Mailing Address 211 Otis Rd

City: Barrington Hills State: IL Zip Code: 60010

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

Name of Employer: Spo Partners and Co. Occupation: Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 09 / 30 / 2011

**Transaction ID : SA11AI.19100**

Amount of Each Receipt this Period: 2500.00

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

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

6500.00

**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. James Holden</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011	
Mailing Address 211 Otis Rd.		<b>Transaction ID : SA11AI.19101</b>	
City Barrington Hills	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Holden International	Occupation CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Patricia A Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2011	
Mailing Address 218 Steeplechase Dr		<b>Transaction ID : SA11AI.19150</b>	
City Barrington Hills	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Info Requested	Occupation Info Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) <b>C. William W Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2011	
Mailing Address 14 Executive Court		<b>Transaction ID : SA11AI.19151</b>	
City South Barrington	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Kennedy Homes	Occupation Home Builder		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 19 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Terrence Kenny</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2011	
Mailing Address 13002 Timber TRL		<b>Transaction ID : SA11AI.19155</b>	
City Palos Heights	State IL	Zip Code 60463	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer n/a	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. James Kirth</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011	
Mailing Address 20390 Park Hill Dr.		<b>Transaction ID : SA11AI.19167</b>	
City Deer Park	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer menards	Occupation sales		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) <b>C. Marimarie Konicek</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2011	
Mailing Address 455 Oak Knoll Rd		<b>Transaction ID : SA11AI.19178</b>	
City Barrington	State IL	Zip Code 60010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer na	Occupation homemaker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	575.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Kuesis**

Mailing Address 1250 bank drive

City Schaumburg State IL Zip Code 60173

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

Name of Employer Systems Research Inc Occupation Recruiter

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19190**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 4140 Utica Ridge Rd.  
PO 1327

City Bettendorf State IA Zip Code 52722

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.19192**

Amount of Each Receipt this Period  
 2500.00

Primary Debt Retirement-100 refund issued

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

Mailing Address 4140 Utica Ridge Rd.  
PO 1327

City Bettendorf State IA Zip Code 52722

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.19193**

Amount of Each Receipt this Period  
 2500.00

General Debt Retirement-100 refund issued

**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 21 OF 120			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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

**A.** Full Name (Last, First, Middle Initial)  
**Zshama Kumar**

Mailing Address 4140 Utica Ridge Rd.  
PO 1327

City Bettendorf State IA Zip Code 52722

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2011

**Transaction ID : SA11AI.19195**

Amount of Each Receipt this Period  
2500.00  
Primary Debt Retirement-100 refund issued

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

Mailing Address 4140 Utica Ridge Rd.  
PO 1327

City Bettendorf State IA Zip Code 52722

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2011

**Transaction ID : SA11AI.19196**

Amount of Each Receipt this Period  
2500.00  
General Debt Retirement-100 refund issued

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

Mailing Address 1312 Galloway Dr.

City Woodstock State IL Zip Code 60098

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

Name of Employer Occupation  
Advanced Flexible Composites Inc. HR Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 31 / 2011

**Transaction ID : SA11AI.19223**

Amount of Each Receipt this Period  
500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Dale Lewis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 26 / 2011
Mailing Address 1312 Galloway Dr.		<b>Transaction ID : SA11AI.19224</b>
City Woodstock	State IL	
Zip Code 60098		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Advanced Flexible Composites Inc.	Occupation HR Manager	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Daniel Liesen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2011
Mailing Address 655 Williamsburg Ave		<b>Transaction ID : SA11AI.19228</b>
City Gurnee	State IL	
Zip Code 60031		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Scheer Liesen Surgical	Occupation Surgeon	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Henry Logue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 1000 Garlands Ln Apt 1221		<b>Transaction ID : SA11AI.19236</b>
City Barrington	State IL	
Zip Code 60010		Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**George A Long**

Mailing Address 14 lower Shad Rd

City Pound Ridge State NY Zip Code 10576

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  
 09 / 30 / 2011

**Transaction ID : SA11AI.19239**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1219 Barclay Circle

City Inverness State IL Zip Code 60010

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

Name of Employer AIS Network Occupation President, Midwest Operations

Receipt For: 2010  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19246**

Amount of Each Receipt this Period  
 1750.00

General Debt Retirement

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

Mailing Address 6 Oak Creek Rd

City Rolling Meadows State IL Zip Code 60008

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

Name of Employer Illinois Tool Works Inc. Occupation Lobbyist

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2011

**Transaction ID : SA11AI.19249**

Amount of Each Receipt this Period  
 250.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1336 Basswood Road

City State Zip Code  
Schaumburg IL 60173

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

Name of Employer Occupation  
CTCA CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3667.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2011

**Transaction ID : SA11AI.19282**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 156 S Sunnyside Ave

City State Zip Code  
Elmhurst IL 60126

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

Name of Employer Occupation  
RMMS LLP 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  
09 / 12 / 2011

**Transaction ID : SA11AI.19283**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 28729 N Harrison Ave

City State Zip Code  
Wauconda IL 60084

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

Name of Employer Occupation  
Self Horseshoer

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  
09 / 26 / 2011

**Transaction ID : SA11AI.19290**

Amount of Each Receipt this Period  
100.00

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

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

2600.00



**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mead Montgomery**

Mailing Address 945 Old Green Bay Rd.

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
Montgomery Shelton & Co chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 15 / 2011

**Transaction ID : SA11AI.19317**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1753 N Wood

City State Zip Code  
Chicago IL 60622

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

Name of Employer Occupation  
Carlson Green Solutions LLC Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2011

**Transaction ID : SA11AI.19336**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 445 E North Water St.  
Apt 904

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2011

**Transaction ID : SA11AI.19337**

Amount of Each Receipt this Period  
100.00

**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 26 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Full Name (Last, First, Middle Initial) <b>A. Paul Narang</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 26 / 2011
Mailing Address 23689 W. Petite Lake Road		<b>Transaction ID : SA11AI.19345</b>
City Lake Villa	State IL	
Zip Code 60046		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Blue Cross Blue Shield Association	Occupation Information Technology	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Walter Nielsen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2011
Mailing Address 546 Timber Lane		<b>Transaction ID : SA11AI.19350</b>
City Lake Forest	State IL	
Zip Code 60045		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Walter Nielsen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 546 Timber Lane		<b>Transaction ID : SA11AI.19351</b>
City Lake Forest	State IL	
Zip Code 60045		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer self employed	Occupation attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Eric Nixon**

Mailing Address 5401 Fargo Ave

City Skokie State IL Zip Code 60077

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19353**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 7521 Wentwood

City Dallas State TX Zip Code 75225

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19354**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Larry O'Connor**

Mailing Address 19910 Kishwaukee Valley Rd.

City Marengo State IL Zip Code 60152

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

Name of Employer Occupation  
 Other World Computing 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  
 08 / 26 / 2011

**Transaction ID : SA11AI.19365**

Amount of Each Receipt this Period  
 100.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mary Louise Obenauf**

Mailing Address 36347 N Tara Ct

City: Ingleside State: IL Zip Code: 60041

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: 250.00

Date of Receipt: 07 / 27 / 2011

**Transaction ID : SA11AI.19361**

Amount of Each Receipt this Period: 50.00

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

Mailing Address 36347 N Tara Ct

City: Ingleside State: IL Zip Code: 60041

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: 300.00

Date of Receipt: 08 / 26 / 2011

**Transaction ID : SA11AI.19363**

Amount of Each Receipt this Period: 50.00

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

Mailing Address 1424 W Flournoy

City: Chicago State: IL Zip Code: 60607

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

Name of Employer: McGuirewoods LLP Occupation: Legal Asst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 30 / 2011

**Transaction ID : SA11AI.19372**

Amount of Each Receipt this Period: 1000.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Robert Palamar</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2011
Mailing Address PO Box 7532		<b>Transaction ID : SA11AI.19373</b>
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation IL State Toll Highway Authorit Toll Collector	Amount of Each Receipt this Period 400.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Palamar</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address PO Box 7532		<b>Transaction ID : SA11AI.19374</b>
City State Zip Code Gurnee IL 60031	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation IL State Toll Highway Authorit Toll Collector	Amount of Each Receipt this Period 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Parillo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 1313 NW 167th St.		<b>Transaction ID : SA11AI.19379</b>
City State Zip Code Miami Gardens FL 33169	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation UAIC Chairman/CEO	Amount of Each Receipt this Period 5000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas J. Patitsas**

Mailing Address 606 Braemar Ln

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Janco Process Controls Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2011

**Transaction ID : SA11AI.19383**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 15 Douglas Ave.

City State Zip Code  
Elgin IL 60120

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

Name of Employer Occupation  
Illinois Pain Institute Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.19416**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 15 Douglas Ave.

City State Zip Code  
Elgin IL 60120

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

Name of Employer Occupation  
Illinois Pain Institute Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19417**

Amount of Each Receipt this Period  
100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Sanjay Puri**

Mailing Address PO Box 2338

City Reston State VA Zip Code 20195

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19421**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1251 NW Briarcliff Pkwy, Ste 85

City Kansas City State MO Zip Code 64116

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

Name of Employer Occupation  
 Axiom Strategies 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  
 09 / 30 / 2011

**Transaction ID : SA11AI.19455**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 1251 NW Briarcliff Pkwy, Ste 85

City Kansas City State MO Zip Code 64116

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

Name of Employer Occupation  
 Axiom Strategies 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  
 09 / 30 / 2011

**Transaction ID : SA11AI.19456**

Amount of Each Receipt this Period  
 2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Sally Roeckell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2011
Mailing Address 25292 Pebble Creek		<b>Transaction ID : SA11AI.19458</b>
City Tower Lakes	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Roeckell Photography	Occupation Photographer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Bette Roeser</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 36 Brinker RD		<b>Transaction ID : SA11AI.19459</b>
City Barrington Hills	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas J. Roeser</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 36 Brinker Rd		<b>Transaction ID : SA11AI.19461</b>
City Barrington Hills	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Derrick Roth**

Mailing Address 2782 Jackson St

City San Francisco State CA Zip Code 94115

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19465**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 6531 NW 72nd PL

City Parkland State FL Zip Code 33067

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19467**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 6531 NW 72nd PL

City Parkland State FL Zip Code 33067

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19469**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Eugene Rueter</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 4287 Silver Fox Ln		<b>Transaction ID : SA11AI.19476</b>
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer n/a	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) <b>Jeff Schroeder</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 787 Brookfield Ct		<b>Transaction ID : SA11AI.19497</b>
City Lake Zurich	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Eng Manager	Occupation Intermatic	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>George L Schueppert</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2011
Mailing Address 97 Otis Rd		<b>Transaction ID : SA11AI.19498</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Great Books Foundation	Occupation President	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<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 35 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Ted Scislowski</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2011	
Mailing Address 5375 Mallard Ln		<b>Transaction ID : SA11AI.19501</b>	
City Hoffman Estates	State IL	Zip Code 60192	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer National Hospitality	Occupation Owner/President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Andrew Shore</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 26 / 2011	
Mailing Address 5904 N 22nd Street		<b>Transaction ID : SA11AI.19513</b>	
City Arlington	State VA	Zip Code 22205	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Jochum Shore & Trossevin PC	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. Allen Skillicorn</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2011	
Mailing Address 245 dunridge circle		<b>Transaction ID : SA11AI.19519</b>	
City east dundee	State IL	Zip Code 60118	Amount of Each Receipt this Period 251.00
FEC ID number of contributing federal political committee. C			
Name of Employer PE Inc	Occupation sales		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 251.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3251.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Stanley J Stack Jr.**

Mailing Address 389 N Valley Ct

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19536**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 28264 N Gilmer Road

City State Zip Code  
Mundelein IL 60060

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

Name of Employer Occupation  
Northern Illinois Mack Inc Clerical

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  
 09 / 30 / 2011

**Transaction ID : SA11AI.19538**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3400 Garlands Lane

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19539**

Amount of Each Receipt this Period  
100.00

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

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

1200.00

**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Nina J Stephenson**

Mailing Address 84 Meadow Hill Road

City State Zip Code  
Barrington Hills IL 60010

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

Name of Employer Occupation  
Attorney Self

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  
 07 / 07 / 2011

**Transaction ID : SA11AI.19540**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 26 Brinker Road

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Arbor Research & Trading, Inc. CEO

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  
 09 / 30 / 2011

**Transaction ID : SA11AI.19544**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 77 Meadow Hill Farm

City State Zip Code  
Barrington Hills IL 60010

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11AI.19554**

Amount of Each Receipt this Period  
1000.00

**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 38 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Diane A Wamberg</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2011
Mailing Address 7 Fox Hunt Rd.		<b>Transaction ID : SA11AI.18377</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Homemaker	Occupation Homemaker	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Diane A Wamberg</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2011
Mailing Address 7 Fox Hunt Rd.		<b>Transaction ID : SA11AI.20080</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2500.00
Name of Employer Homemaker	Occupation Homemaker	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Diane A Wamberg</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2011
Mailing Address 7 Fox Hunt Rd.		<b>Transaction ID : SA11AI.20081</b>
City Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Homemaker	Occupation Homemaker	Redesignate: to General <b>[MEMO ITEM]</b>
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<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 39 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Diane A Wamberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 7 Fox Hunt Rd.		<b>Transaction ID : SA11AI.19607</b>
City Barrington	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer Homemaker	Occupation Homemaker	Reattribution Requested
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Warren</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 26 / 2011
Mailing Address 265 Sunrise Ln		<b>Transaction ID : SA11AI.19609</b>
City Lake Zurich	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. m elizabeth weiss</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2011
Mailing Address 1304 Hawthorne Lane		<b>Transaction ID : SA11AI.19618</b>
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer hawthorne ranch	Occupation fruitrancher	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<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 40 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Dolores Williams**

Mailing Address Po Box 1296

City State Zip Code  
Festus MO 63028

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11AI.19634**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 2435 Lexington Drive

City State Zip Code  
Long Grove IL 60047

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.19660**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 265 Donlea Rd

City State Zip Code  
Barrington IL 60010

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

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

**Transaction ID : SA11AI.19661**

Amount of Each Receipt this Period  
100.00

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

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

650.00



**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 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Ronald Yeo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2011
Mailing Address 630 Summerlyn Dr		Transaction ID : SA11AI.19668
City Antioch	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Aunet Electronics	Occupation Sales	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>B. Edward W Young</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 06 / 2011
Mailing Address 20 Graystone Lane		Transaction ID : SA11AI.19669
City North Barrington	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer N/a	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
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).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	109576.00

**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 120
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN AIRLINES POLITICAL ACTION COMMITTEE**

Mailing Address 1101 17 Street N.W. Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00107300

Name of Employer Occupation

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  
 08 / 02 / 2011

**Transaction ID : SA11C.18704**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1201 L STREET, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C.18728**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 192 LIBERTY LANE

City ANNISTON State AL Zip Code 36207

FEC ID number of contributing federal political committee. **C** C00439521

Name of Employer Occupation

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  
 08 / 02 / 2011

**Transaction ID : SA11C.18705**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

**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 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2011

**Transaction ID : SA11C.20084**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 208 S. Akard Street  
Suite 2701

City Dallas State TX Zip Code 75202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2011

**Transaction ID : SA11C.18709**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL**

Mailing Address 1701 JFK Blvd, 49th Floor  
35th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2011

**Transaction ID : SA11C.18715**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 44 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE**

Mailing Address 3 Bethesda Metro Center  
Suite 1100

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11C.18720**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE**

Mailing Address 3 Bethesda Metro Center  
Suite 1100

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2010  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2011

**Transaction ID : SA11C.18719**

Amount of Each Receipt this Period  
2000.00

Primary Debt Retirement

**C.** Full Name (Last, First, Middle Initial)  
**GROWTH AND PROSPERITY POLITICAL ACTION COMMITTEE**

Mailing Address 831 LINWOOD COURT

City State Zip Code  
BIRMINGHAM AL 35222

FEC ID number of contributing federal political committee. **C** C00388793

Name of Employer Occupation

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  
 07 / 15 / 2011

**Transaction ID : SA11C.18702**

Amount of Each Receipt this Period  
1000.00

**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 45 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13768.76

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2011

**Transaction ID : SA11C.18713**

Amount of Each Receipt this Period  
634.38

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

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15634.38

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2011

**Transaction ID : SA11C.18714**

Amount of Each Receipt this Period  
1865.62

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

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
16634.38

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2011

**Transaction ID : SA11C.18718**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 120
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPPAC)**

Mailing Address 300 M STREET S.E.  
SUITE 350

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

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  
08 / 08 / 2011

**Transaction ID : SA11C.18710**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 116 N Main St.  
PO Box 400

City Early State IA Zip Code 50535

FEC ID number of contributing federal political committee. **C** C00373563

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2011

**Transaction ID : SA11C.18701**

Amount of Each Receipt this Period  
1000.00

General Debt Retirement

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

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  
09 / 06 / 2011

**Transaction ID : SA11C.18716**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 120
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALEERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1101 KING STREET**  
**SUITE 600**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
**08 / 02 / 2011**

**Transaction ID : SA11C.18707**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **ONE NATIONWIDE PLAZA**  
**1-27-10**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00076174**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
**09 / 27 / 2011**

**Transaction ID : SA11C.18727**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address **401 9TH STREET NW**  
**SUITE 550**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00361758**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**09 / 15 / 2011**

**Transaction ID : SA11C.18723**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 120
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11C.18725**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC**

Mailing Address 15 MOUNTAIN VIEW ROAD

City WARREN State NJ Zip Code 07059

FEC ID number of contributing federal political committee. **C** C00229203

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2011

**Transaction ID : SA11C.18721**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2011

**Transaction ID : SA11C.18712**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

27000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. 111 Grille</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2011
Mailing Address 200 Applebee St.		Amount of Each Disbursement this Period 294.00
City Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Meeting-Meals	Transaction ID : SB17.19752
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 111 Grille</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2011
Mailing Address 200 Applebee St.		Amount of Each Disbursement this Period 18.24
City Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Meeting-Meals	Transaction ID : SB17.19753
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Acqua AI 2</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2011
Mailing Address 212 7th St SE		Amount of Each Disbursement this Period 321.10
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Parade Supplies	Transaction ID : SB17.19757
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	633.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. ADLEXX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address PO Box 9594		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : SB17.19759</b>
City Springfield	State IL	
Zip Code 62791	Purpose of Disbursement Advertising-Banners	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADLEXX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address PO Box 9594		Amount of Each Disbursement this Period 856.30 <b>Transaction ID : SB17.19760</b>
City Springfield	State IL	
Zip Code 62791	Purpose of Disbursement Advertising-Balloons	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 172.70 <b>Transaction ID : SB17.19761</b>
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1654.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 120		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 408.90
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Travel	Transaction ID : SB17.19762
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 20.00
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Travel	Transaction ID : SB17.19763
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 91.00
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Travel	Transaction ID : SB17.19764
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	519.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AirTran Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011
Mailing Address 5230 Clipper Rd #100		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : SB17.19765</b>
City Atlanta	State GA Zip Code 30349	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 1516 2nd Ave.		Amount of Each Disbursement this Period 99.90 <b>Transaction ID : SB17.19771</b>
City Seattle	State WA Zip Code 98144	
Purpose of Disbursement Office Equipment	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 335.11 <b>Transaction ID : SB17.19772</b>
City Ft. Lauderdale	State FL Zip Code 33336	
Purpose of Disbursement Merchant Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	455.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 19.84
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.19773
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2011
Mailing Address P.O. Box 360001		Amount of Each Disbursement this Period 28.06
City Ft. Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Merchant Fees	Transaction ID : SB17.19774
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Antioch Township Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address P.O. Box 484		Amount of Each Disbursement this Period 500.00
City Antioch	State IL	
Zip Code 60002	Purpose of Disbursement Print Advertising	Transaction ID : SB17.19775
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	547.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Axiom Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 1251 NW Briarcliff Pkwy, ste 85		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.19777</b>
City Kansas City State MO Zip Code 64116	Purpose of Disbursement Strategic Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Axiom Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2011
Mailing Address 1251 NW Briarcliff Pkwy, ste 85		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.19778</b>
City Kansas City State MO Zip Code 64116	Purpose of Disbursement Strategic Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Barrington Park District</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address		Amount of Each Disbursement this Period 362.50 <b>Transaction ID : SB17.19780</b>
City Barrington State IL Zip Code 60010	Purpose of Disbursement Event Site Rental	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6362.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011
Mailing Address #1166		Amount of Each Disbursement this Period 349.62
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement Office Equipment	Transaction ID : SB17.19781
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cafe Berlin on Capitol Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011
Mailing Address 322 Massachusetts Avenue		Amount of Each Disbursement this Period 18.40
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Meeting-Meals	Transaction ID : SB17.19792
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Grid</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2011
Mailing Address 223 Summit Ave.		Amount of Each Disbursement this Period 500.00
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Online Processing	Transaction ID : SB17.19796
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	868.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 973.64		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.19797		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 126.50		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.19798		
Purpose of Disbursement Meeting-Meals		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011		
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 364.08		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.19799		
Purpose of Disbursement Meeting-Meals		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1464.22
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 29.85
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meeting-Meals	Candidate Name	<b>Transaction ID : SB17.19800</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 126.50
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meeting-Meals	Candidate Name	<b>Transaction ID : SB17.19801</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. CBC Tax &amp; Accounting</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2011
Mailing Address 1843 Hicks Rd Suite A		Amount of Each Disbursement this Period 5100.00
City Rolling Meadows	State IL Zip Code 60008	
Purpose of Disbursement Accounting Services	Candidate Name	<b>Transaction ID : SB17.19676</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5256.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address 1601 Trapelo Rd., Ste329			Amount of Each Disbursement this Period 58.44
City Waltham	State MA	Zip Code 02451	
Purpose of Disbursement Web Services		Candidate Name	Transaction ID : SB17.19809
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2011
Mailing Address 1601 Trapelo Rd., Ste329			Amount of Each Disbursement this Period 58.44
City Waltham	State MA	Zip Code 02451	
Purpose of Disbursement Web Services		Candidate Name	Transaction ID : SB17.19810
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011
Mailing Address 1601 Trapelo Rd., Ste329			Amount of Each Disbursement this Period 58.44
City Waltham	State MA	Zip Code 02451	
Purpose of Disbursement Web Services		Candidate Name	Transaction ID : SB17.19811
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	175.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 250 N Randall Rd		Amount of Each Disbursement this Period 321.78
City Lake in the Hills	State IL	
Zip Code 60156	Purpose of Disbursement Event Decorations	Transaction ID : SB17.19813
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Decker Consulting Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address 244 14th Place NE #2		Amount of Each Disbursement this Period 1505.18
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.19678
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Decker Consulting Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 244 14th Place NE #2		Amount of Each Disbursement this Period 4897.90
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.19680
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6724.86
<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 60 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Decker Consulting Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address 244 14th Place NE #2		Amount of Each Disbursement this Period 1622.27 <b>Transaction ID : SB17.19682</b>
City Washington State DC Zip Code 20002	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dockers</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address 33 W Grand Ave		Amount of Each Disbursement this Period 83.46 <b>Transaction ID : SB17.19822</b>
City Fox Lake State IL Zip Code 60020	Purpose of Disbursement Meeting-Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Dockers</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 33 W Grand Ave		Amount of Each Disbursement this Period 72.58 <b>Transaction ID : SB17.19823</b>
City Fox Lake State IL Zip Code 60020	Purpose of Disbursement Meeting-Meals Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1778.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 120		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Dockers</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 33 W Grand Ave		Amount of Each Disbursement this Period 537.37 <b>Transaction ID : SB17.19824</b>
City Fox Lake	State IL	
Zip Code 60020	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dockers</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011
Mailing Address 33 W Grand Ave		Amount of Each Disbursement this Period 19.53 <b>Transaction ID : SB17.19825</b>
City Fox Lake	State IL	
Zip Code 60020	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.19734</b>
City Algonquin	State IL	
Zip Code 60102	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1751.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 751.59 <b>Transaction ID : SB17.19735</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.19736</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nicole Dziuban</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 1379 Grandview Ct		Amount of Each Disbursement this Period 1194.42 <b>Transaction ID : SB17.19737</b>
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3140.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Nicole Dziuban</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011		
Mailing Address 1379 Grandview Ct			Amount of Each Disbursement this Period 1194.42		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19738		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Nicole Dziuban</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011		
Mailing Address 1379 Grandview Ct			Amount of Each Disbursement this Period 1194.42		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19739		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Nicole Dziuban</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2011		
Mailing Address 1379 Grandview Ct			Amount of Each Disbursement this Period 1194.42		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19740		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 571.05
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : SB17.19837
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 60.61
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : SB17.19838
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 231.66
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : SB17.19839
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	863.32
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011		
Mailing Address 1494 S Randall Rd			Amount of Each Disbursement this Period 39.11		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19840		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011		
Mailing Address 1494 S Randall Rd			Amount of Each Disbursement this Period 45.94		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19841		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. FedEx Office</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011		
Mailing Address 1494 S Randall Rd			Amount of Each Disbursement this Period 60.90		
City Algonquin	State IL	Zip Code 60102	Transaction ID : SB17.19842		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	145.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 64.10
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19843
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 47.24
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19844
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 236.85
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19845
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	348.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 2.40
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 118.42
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19847
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 35.53
City Algonquin	State IL Zip Code 60102	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.19848
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	156.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2011
Mailing Address 1494 S Randall Rd		Amount of Each Disbursement this Period 571.05
City Algonquin State IL Zip Code 60102	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19849</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2011
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 108.20
City Denver State CO Zip Code 80249	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19860</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Frontier Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2011
Mailing Address 7001 Tower Rd		Amount of Each Disbursement this Period 15.00
City Denver State CO Zip Code 80249	Purpose of Disbursement Travel	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19861</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	694.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 120		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gurnee Days Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address PO Box 111		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : SB17.19865</b>
City Gurnee	State IL	
Zip Code 60031	Purpose of Disbursement Parade Registration	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Happy Cleaners</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011
Mailing Address 3606 Chapel Hill Rd.		Amount of Each Disbursement this Period 281.96 <b>Transaction ID : SB17.19869</b>
City Johnsburg	State IL	
Zip Code 60051	Purpose of Disbursement Office Cleaning	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hayneedle Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2011
Mailing Address 12720 I St., Ste. 200		Amount of Each Disbursement this Period 169.98 <b>Transaction ID : SB17.19874</b>
City Omaha	State NE	
Zip Code 68127	Purpose of Disbursement Event - Tent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	676.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Hilton Garden Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2011
Mailing Address 1191 woodfield Rd.		Amount of Each Disbursement this Period 102.12 <b>Transaction ID : SB17.19875</b>
City Schaumburg	State IL	
Zip Code 60173	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Huckaby Davis Lisker, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 1382.80 <b>Transaction ID : SB17.19684</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Huckaby Davis Lisker, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 228 S. Washington St., Ste. 115		Amount of Each Disbursement this Period 1658.45 <b>Transaction ID : SB17.19686</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3143.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. iDonate Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2011
Mailing Address 2033 San Elijo Ave #203		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.19884</b>
City Cardiff by the Sea	State CA	
Zip Code 92007	Purpose of Disbursement Online Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. iDonate Pro</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 2033 San Elijo Ave #203		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : SB17.19885</b>
City Cardiff by the Sea	State CA	
Zip Code 92007	Purpose of Disbursement Online Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Illinois Department of Employment Security</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2011
Mailing Address P.O. Box 19300		Amount of Each Disbursement this Period 722.00 <b>Transaction ID : SB17.19886</b>
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	972.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 70.83	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19887	
Purpose of Disbursement		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 70.83	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19888	
Purpose of Disbursement		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 570.73	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19889	
Purpose of Disbursement Payroll Taxes		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	712.39
<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 73 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 70.83	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19890	
Purpose of Disbursement Payroll Taxes		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 70.83	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19891	
Purpose of Disbursement Payroll Taxes		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Illinois Department of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2011	
Mailing Address P.O. Box 199447			Amount of Each Disbursement this Period 70.83	
City Springfield	State IL	Zip Code 62794	Transaction ID : SB17.19892	
Purpose of Disbursement Payroll Taxes		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	212.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement
Mailing Address P.O. Box 804522		M M / D D / Y Y Y Y 07 / 07 / 2011
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 349.50
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19895</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement
Mailing Address P.O. Box 804522		M M / D D / Y Y Y Y 07 / 19 / 2011
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 349.50
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19896</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement
Mailing Address P.O. Box 804522		M M / D D / Y Y Y Y 08 / 03 / 2011
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 2678.96
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19897</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3377.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 349.50 <b>Transaction ID : SB17.19898</b>
City Cincinnati	State OH	Zip Code 45280	
Purpose of Disbursement Payroll Taxes		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2011
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 349.50 <b>Transaction ID : SB17.19899</b>
City Cincinnati	State OH	Zip Code 45280	
Purpose of Disbursement Payroll Taxes		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address P.O. Box 804522			Amount of Each Disbursement this Period 349.50 <b>Transaction ID : SB17.19900</b>
City Cincinnati	State OH	Zip Code 45280	
Purpose of Disbursement Payroll Taxes		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1048.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Intuit QB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2011		
Mailing Address 2632 Marine Way			Amount of Each Disbursement this Period 13.76		
City Mountain View	State CA	Zip Code 94943	Transaction ID : SB17.19901		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Intuit QB</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011		
Mailing Address 2632 Marine Way			Amount of Each Disbursement this Period 83.92		
City Mountain View	State CA	Zip Code 94943	Transaction ID : SB17.19902		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Intuit QB</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2011		
Mailing Address 2632 Marine Way			Amount of Each Disbursement this Period 13.76		
City Mountain View	State CA	Zip Code 94943	Transaction ID : SB17.19903		
Purpose of Disbursement Software		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	111.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Intuit QB</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 13.76
City Mountain View	State CA Zip Code 94943	
Purpose of Disbursement Software	Candidate Name	Transaction ID : SB17.19904
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. J &amp; D's Bar &amp; Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2011
Mailing Address 26400 N. Rand Rd.		Amount of Each Disbursement this Period 276.31
City Wauconda	State IL Zip Code 60084	
Purpose of Disbursement Event Catering	Candidate Name	Transaction ID : SB17.19906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Jamestown Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 5 Mapleton Rd, 300		Amount of Each Disbursement this Period 2000.00
City Princeton	State NJ Zip Code 08540	
Purpose of Disbursement Direct Mail Production	Candidate Name	Transaction ID : SB17.19689
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2290.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Jewel Food Store</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address 885 E. Belvidere Rd.		Amount of Each Disbursement this Period 86.42
City Grayslake State IL Zip Code 60030	Purpose of Disbursement parade supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19908</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kendall Country Republicans</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address PO Box 444		Amount of Each Disbursement this Period 500.00
City Yorkville State IL Zip Code 60560	Purpose of Disbursement Meeting Expense	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19914</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kendall County Young Republicans</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address PO Box 864		Amount of Each Disbursement this Period 500.00
City Oswego State IL Zip Code 60543	Purpose of Disbursement Meeting Expense	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19916</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1086.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. La Lomita Dos</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2011
Mailing Address 308 Pennsylvania Ave., NE		Amount of Each Disbursement this Period 96.15 <b>Transaction ID : SB17.19917</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. La Lomita Dos</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2011
Mailing Address 308 Pennsylvania Ave., NE		Amount of Each Disbursement this Period 284.65 <b>Transaction ID : SB17.19918</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. La Lomita Dos</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2011
Mailing Address 308 Pennsylvania Ave., NE		Amount of Each Disbursement this Period 51.90 <b>Transaction ID : SB17.19919</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	432.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Lavagna</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011		
Mailing Address 539 8th St. SE			Amount of Each Disbursement this Period 290.00		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.19922		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Mailchimp.com</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011		
Mailing Address 512 Means St. #404			Amount of Each Disbursement this Period 50.00		
City Atlanta	State GA	Zip Code 30318	Transaction ID : SB17.19924		
Purpose of Disbursement Web Services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Mailchimp.com</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011		
Mailing Address 512 Means St. #404			Amount of Each Disbursement this Period 50.00		
City Atlanta	State GA	Zip Code 30318	Transaction ID : SB17.19925		
Purpose of Disbursement Web Services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	390.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mailchimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011
Mailing Address 512 Means St. #404		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.19926</b>
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Web Services Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mayer Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2011
Mailing Address 71 South Wacker Drive		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.19691</b>
City Chicago State IL Zip Code 60606	Purpose of Disbursement Legal Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. McHenry NRA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2011
Mailing Address 8609 Hogback Rd.		Amount of Each Disbursement this Period 590.00 <b>Transaction ID : SB17.19929</b>
City Woodstock State IL Zip Code 66098	Purpose of Disbursement Print Advertising Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5640.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Menards</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address 1400 S US HWY 12		Amount of Each Disbursement this Period 211.71 <b>Transaction ID : SB17.19934</b>
City Fox Lake	State IL	
Zip Code 60020	Purpose of Disbursement parade supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Menards</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address 1400 S US HWY 12		Amount of Each Disbursement this Period 31.06 <b>Transaction ID : SB17.19935</b>
City Fox Lake	State IL	
Zip Code 60020	Purpose of Disbursement parade supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Andrew Nelms</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2011
Mailing Address 32853 Pleasant Hill Rd		Amount of Each Disbursement this Period 337.90 <b>Transaction ID : SB17.19742</b>
City Genoa	State IL	
Zip Code 60135	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	580.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address 5561 Northwest Hwy		Amount of Each Disbursement this Period 334.36
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement parade decorations	Transaction ID : SB17.19954
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Patrichson-Hirsch Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2011
Mailing Address 5411 Keeney St.		Amount of Each Disbursement this Period 20000.00
City Morton Grove	State IL	
Zip Code 60053	Purpose of Disbursement Strategic Consulting	Transaction ID : SB17.19694
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00
City Northfield	State IL	
Zip Code 60093	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17.19958
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23334.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00
City Northfield	State IL Zip Code 60093	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Transaction ID : SB17.19959
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 3000.00
City Northfield	State IL Zip Code 60093	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Transaction ID : SB17.19960
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. PKL Consulting Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011
Mailing Address 621 Thornwood Lane		Amount of Each Disbursement this Period 171.42
City Northfield	State IL Zip Code 60093	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Transaction ID : SB17.19961
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6171.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Dominic Provenzano</b>			Date of Disbursement MM / DD / YYYY 07 / 22 / 2011	
Mailing Address 316 Brookwood Tr			Amount of Each Disbursement this Period 9833.75	
City McHenry	State IL	Zip Code 60050	Transaction ID : SB17.19696	
Purpose of Disbursement Strategic Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Dominic Provenzano</b>			Date of Disbursement MM / DD / YYYY 08 / 01 / 2011	
Mailing Address 316 Brookwood Tr			Amount of Each Disbursement this Period 2762.86	
City McHenry	State IL	Zip Code 60050	Transaction ID : SB17.19698	
Purpose of Disbursement Strategic Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Dominic Provenzano</b>			Date of Disbursement MM / DD / YYYY 08 / 01 / 2011	
Mailing Address 316 Brookwood Tr			Amount of Each Disbursement this Period 3186.89	
City McHenry	State IL	Zip Code 60050	Transaction ID : SB17.19700	
Purpose of Disbursement Strategic Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7933.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 120	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. Reachfly</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2011
Mailing Address 440 Westwood Court Suite A		Amount of Each Disbursement this Period 530.82
City Crystal Lake	State IL	
Zip Code 60014	Purpose of Disbursement Telemarketing	<b>Transaction ID : SB17.19968</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Renaissance Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011
Mailing Address 999 Ninth St. NW		Amount of Each Disbursement this Period 2.78
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meeting-Meals	<b>Transaction ID : SB17.19969</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Manuel Robles</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2011
Mailing Address 79 E Buecker Apt D		Amount of Each Disbursement this Period 350.00
City Addison	State IL	
Zip Code 60050	Purpose of Disbursement Parage Entertainment-Music	<b>Transaction ID : SB17.19744</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	883.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Manuel Robles</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2011
Mailing Address 79 E Buecker Apt D		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.19745</b>
City Addison State IL Zip Code 60050	Purpose of Disbursement Parage Entertainment-Music Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Manuel Robles</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2011
Mailing Address 79 E Buecker Apt D		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.19746</b>
City Addison State IL Zip Code 60050	Purpose of Disbursement Parage Entertainment-Music Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Manuel Robles</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2011
Mailing Address 79 E Buecker Apt D		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.19747</b>
City Addison State IL Zip Code 60050	Purpose of Disbursement Parage Entertainment-Music Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 120		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 2575.90
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Direct Mail Production	<b>Transaction ID : SB17.19702</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 3037.90
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Direct Mail Production	<b>Transaction ID : SB17.19704</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 1992.59
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Direct Mail Production	<b>Transaction ID : SB17.19706</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7606.39
<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 89 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. SCM Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2011
Mailing Address PO Box		Amount of Each Disbursement this Period 13411.00
City Dublin	State NH	
Zip Code 03444	Purpose of Disbursement Direct Mail Production	<b>Transaction ID : SB17.19708</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Shindigz</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2011
Mailing Address PO Box 305		Amount of Each Disbursement this Period 209.88
City So Whitley	State IN	
Zip Code 46787	Purpose of Disbursement parade decorations	<b>Transaction ID : SB17.19987</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sprint Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2011
Mailing Address PO Box 660075		Amount of Each Disbursement this Period 136.08
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Cell Phone	<b>Transaction ID : SB17.19989</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13756.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Sprint Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2011
Mailing Address PO Box 660075		Amount of Each Disbursement this Period 133.79
City Dallas State TX Zip Code 75266	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19990</b>
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sprint Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2011
Mailing Address PO Box 660075		Amount of Each Disbursement this Period 133.79
City Dallas State TX Zip Code 75266	Purpose of Disbursement Cell Phone	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19991</b>
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 526.24
City Deer Park State IL Zip Code 60010	Purpose of Disbursement Accounting	
Candidate Name	Category/Type	<b>Transaction ID : SB17.19748</b>
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	793.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.19749</b>
City Deer Park	State IL	
Zip Code 60010	Purpose of Disbursement Accounting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Stephanie St. John</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2011
Mailing Address 21077 N Wildrose Ct		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.19750</b>
City Deer Park	State IL	
Zip Code 60010	Purpose of Disbursement Accounting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Target</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2011
Mailing Address 2241 Willow Rd.		Amount of Each Disbursement this Period 41.17 <b>Transaction ID : SB17.20007</b>
City Glenview	State IL	
Zip Code 60025	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1241.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Cottage</b>		Date of Disbursement
Mailing Address 6 E Crystal Lake Ave		M M / D D / Y Y Y Y 07 / 05 / 2011
City Crystal Lake	State IL	Zip Code 60014
Purpose of Disbursement Meeting-Meals	Candidate Name	Amount of Each Disbursement this Period 212.36
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. The David Agency Insurance Inc</b>		Date of Disbursement
Mailing Address 385 N York Rd		M M / D D / Y Y Y Y 09 / 26 / 2011
City Elmhurst	State IL	Zip Code 60126
Purpose of Disbursement Insurance	Candidate Name	Amount of Each Disbursement this Period 263.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>c. Tortilla Coast</b>		Date of Disbursement
Mailing Address 400 First Street SE		M M / D D / Y Y Y Y 07 / 13 / 2011
City Washington	State DC	Zip Code 20016
Purpose of Disbursement Meeting-Meals	Candidate Name	Amount of Each Disbursement this Period 37.41
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	512.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Tortilla Coast</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011		
Mailing Address 400 First Street SE			Amount of Each Disbursement this Period 221.70		
City Washington	State DC	Zip Code 20016	Transaction ID : SB17.20026		
Purpose of Disbursement Event Catering		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2011		
Mailing Address 512 CHESTNUT ST			Amount of Each Disbursement this Period 440.00		
City WINNETKA	State IL	Zip Code 60093	Transaction ID : SB17.20029		
Purpose of Disbursement Postage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2011		
Mailing Address 512 CHESTNUT ST			Amount of Each Disbursement this Period 17.60		
City WINNETKA	State IL	Zip Code 60093	Transaction ID : SB17.20030		
Purpose of Disbursement Postage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	679.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 132.00
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name		Transaction ID : SB17.20031
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 132.00
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name		Transaction ID : SB17.20032
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2011
Mailing Address 512 CHESTNUT ST		Amount of Each Disbursement this Period 17.60
City WINNETKA State IL Zip Code 60093	Purpose of Disbursement Postage	
Candidate Name		Transaction ID : SB17.20033
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	281.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 740.82
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.20037
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 31.79
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.20038
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 304.18
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.20039
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1076.79
<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 96 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2011
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 304.18
City Lehigh Valley	State PA	
Zip Code 18002	Purpose of Disbursement Cell Phone	Transaction ID : SB17.20040
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VFW Woodstock</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2011
Mailing Address 240 N Throop St		Amount of Each Disbursement this Period 137.25
City Woodstock	State IL	
Zip Code 60098	Purpose of Disbursement Event Site Rental	Transaction ID : SB17.20042
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2011
Mailing Address 2019 Richmond Road		Amount of Each Disbursement this Period 100.29
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement parade candy	Transaction ID : SB17.20054
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	541.72
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2011
Mailing Address 2019 Richmond Road		Amount of Each Disbursement this Period 89.58
City McHenry	State IL	
Zip Code 60050	Purpose of Disbursement parade candy	Transaction ID : SB17.20055
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 5000.00
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Travel overpymnt-Reimb to Cmte. by Cong Walsh 10/15/11	Transaction ID : SB17.20063
Candidate Name	Category/Type 008	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 08		

Full Name (Last, First, Middle Initial) <b>C. JOE WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 1331.33
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Mileage	Transaction ID : SB17.19724
Candidate Name	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 08		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6420.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Tom Weber</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2011
Mailing Address 37597 N Douglas		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.19751</b>
City Lake Villa	State IL	
Zip Code 60046	Purpose of Disbursement Office Moving	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. World Class Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2011
Mailing Address 175 Olde Half Day Rd		Amount of Each Disbursement this Period 1196.33 <b>Transaction ID : SB17.19711</b>
City Lincolnshire	State IL	
Zip Code 60069	Purpose of Disbursement Bumper Stickers	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. XPS Professional Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011
Mailing Address 220 East Adams St		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : SB17.20061</b>
City Springfield	State IL	
Zip Code 62701	Purpose of Disbursement Polling	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2896.33
<b>TOTAL</b> This Period (last page this line number only).....	133328.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 120	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. JOE WALSH</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 3900.00 <b>Transaction ID : SB19A.19713</b>
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Loan Repayment	Category/ Type 009
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

Full Name (Last, First, Middle Initial) <b>B. JOE WALSH</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB19A.19715</b>
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Loan Repayment	Category/ Type 009
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

Full Name (Last, First, Middle Initial) <b>C. JOE WALSH</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB19A.19717</b>
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Loan Repayment	Category/ Type 009
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 120	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. JOE WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 4900.00 <b>Transaction ID : SB19A.19719</b>
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Loan Repayment	Category/ Type 009
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

Full Name (Last, First, Middle Initial) <b>B. JOE WALSH</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2011
Mailing Address 29250 N. Gilmer Rd.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB19A.19722</b>
City Mundelein	State IL	
Zip Code 60060	Purpose of Disbursement Loan Repayment	Category/ Type 009
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 08	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6900.00
<b>TOTAL</b> This Period (last page this line number only).....	11900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 120			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) <b>A. Patricia A Foglia</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2011
Mailing Address 43 Castleton Ct		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.19731</b>
City North Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Vince J Foglia</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2011
Mailing Address 121 Ravine Lane		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.19733</b>
City North Barrington	State IL	
Zip Code 60010	Purpose of Disbursement Refund	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Shalabh Kumar</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2011
Mailing Address 4140 Utica Ridge Rd. PO 1327		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB20A.20064</b>
City Bettendorf	State IA	
Zip Code 52722	Purpose of Disbursement Refund-2010 G election debt	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 120			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) <b>A. Shalabh Kumar</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 4140 Utica Ridge Rd. PO 1327		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB20A.20067</b>
City Bettendorf State IA Zip Code 52722	Purpose of Disbursement Refund-2010 Primary Election Debt Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Zshama Kumar</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 4140 Utica Ridge Rd. PO 1327		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB20A.20069</b>
City Bettendorf State IA Zip Code 52722	Purpose of Disbursement Refund-2010 General Election Debt Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Zshama Kumar</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2011
Mailing Address 4140 Utica Ridge Rd. PO 1327		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB20A.20072</b>
City Bettendorf State IA Zip Code 52722	Purpose of Disbursement Refund-2010 Primary Debt Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 120	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. John Roeser</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2011
Mailing Address 522 Lake Shore Dr		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.19728</b>
City N Barrington State IL Zip Code 60010	Purpose of Disbursement Refund Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. John Roeser</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2011
Mailing Address 522 Lake Shore Dr		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB20A.19730</b>
City N Barrington State IL Zip Code 60010	Purpose of Disbursement Refund Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
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:	State: District: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	10400.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : **SC/10.4697**

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

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**JOE WALSH**

Primary

General

Other (specify) ▼

Mailing Address

29250 N. Gilmer Rd.

City

State

ZIP Code

Mundelein

IL

60060

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

4000.00

4000.00

0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

01

26

2010

01/27/2015

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

0.00

**TOTALS** This Period (last page in this line only)..... ▶

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : **SC/10.4698**

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

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**JOE WALSH**

Primary

General

Other (specify) ▼

Mailing Address

29250 N. Gilmer Rd.

City

State

ZIP Code

Mundelein

IL

60060

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

1000.00

0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02

02

2010

02/03/2015

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional).....

0.00

**TOTALS** This Period (last page in this line only).....

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

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6083**  
**JOE WALSH FOR CONGRESS COMMITTEE, INC.**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>JOE WALSH</b>	<b>[PERSONAL FUNDS]</b>	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 29250 N. Gilmer Rd.		

City	State	ZIP Code
Mundelein	IL	60060

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	5000.00	0.00

<b>TERMS</b>		Date Incurred	Date Due	Interest Rate	Secured:
M 06	D 26	Y 2010	M / D / Y 6/27/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>TOTALS</b> This Period (last page in this line only).....	0.00

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

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

Transaction ID : **SC/10.6967**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2010

**JOE WALSH**

Primary

General

Other (specify) ▼

Mailing Address  
29250 N. Gilmer Rd.

City State ZIP Code  
Mundelein IL 60060

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2000.00 2000.00 0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

08

11

2010

08/12/2015

0.00

% (apr)

Yes

No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ [ ] 0.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ] 0.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

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

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

Outstanding Balance Beginning This Period 9525.00	<b>Transaction ID : SD10.16684</b>	
Amount Incurred This Period 0.00	Payment This Period 5100.00	Outstanding Balance at Close of This Period 4425.00

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

Outstanding Balance Beginning This Period 1505.18	<b>Transaction ID : SD10.17753</b>	
Amount Incurred This Period 6520.17	Payment This Period 8025.35	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Huckaby Davis Lisker, Inc.</b>		Nature of Debt (Purpose): Compliance Services
Mailing Address 228 S. Washington St., Ste. 115		
City State	Zip Code	
Alexandria VA	22314	

Outstanding Balance Beginning This Period 1382.80	<b>Transaction ID : SD10.17807</b>	
Amount Incurred This Period 1658.45	Payment This Period 3041.25	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	4425.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

Form/Schedule: SD10

Transaction ID : SD10.16684

The debt reported to CBC Accounting is in dispute

Form/Schedule:

Transaction ID:

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

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

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

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.6001</b>	
<input type="text" value="5650.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>	<input type="text" value="3650.00"/>

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

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.16373</b>	
<input type="text" value="2025.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2975.00"/>	<input type="text" value="5000.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Patrichson-Hirsch Associates</b>		Nature of Debt (Purpose): Disputed debt and amount owed to former campaign consultant
Mailing Address 5411 Keeney St.		
City State	Zip Code	
Morton Grove IL	60053	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.4581</b>	
<input type="text" value="20000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="20000.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="3650.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

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

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

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">12822.50</div>	<b>Transaction ID : SD10.16387</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">7933.50</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">4889.00</div>	

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

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

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

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

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">7289.00</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.16387

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

Form/Schedule: SD10

Transaction ID: SD10.8130

RA Adams Debt-Adjusted by vendor--confirmed no balance due.



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

Form/Schedule: SD10

Transaction ID : SD10.15269

RA Adams Debt-Adjusted by vendor--confirmed no balance due.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

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

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

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal fees in defence of disputed debt and FEC issue
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">4939.81</div>	<b>Transaction ID : SD10.8122</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">4939.81</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>	Nature of Debt (Purpose): Legal Fees for dealing with disputed debt
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800	
City State Zip Code Chicago IL 60601	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2068.52</div>	<b>Transaction ID : SD10.8125</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2068.52</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">8208.33</div>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.15561

RA Adams Debt-Adjusted by vendor--confirmed no balance due.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

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

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

Nature of Debt (Purpose):  
Legal fees for defence of disputed debt

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

City State Zip Code  
Chicago IL 60601

Outstanding Balance Beginning This Period

Transaction ID : SD10.8127

962.50

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

962.50

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

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

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

City State Zip Code  
Chicago IL 60601

Outstanding Balance Beginning This Period

Transaction ID : SD10.15268

918.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

918.00

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

Nature of Debt (Purpose):  
Legal fees for disputed debt

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

City State Zip Code  
Chicago IL 60601

Outstanding Balance Beginning This Period

Transaction ID : SD10.16398

962.50

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

962.50

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

2843.00

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) ▶

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

NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>		Nature of Debt (Purpose): Legal fees for court appearance in regard to disputed debt
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800		
City State	Zip Code	
Chicago IL	60601	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.16399</b>	
<input type="text" value="1382.07"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1382.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Schuyler, Roche ,Crisham, P.C.</b>		Nature of Debt (Purpose): Legal services in regard to prparqtion of recount
Mailing Address 1 Prudential Plaza-130 E. Randolph Suite 3800		
City State	Zip Code	
Chicago IL	60601	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.16686</b>	
<input type="text" value="14434.51"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="14434.51"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SCM Associates</b>		Nature of Debt (Purpose): Direct Mail Production
Mailing Address PO Box		
City State	Zip Code	
Dublin NH	03444	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.17769</b>	
<input type="text" value="5030.49"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="15986.90"/>	<input type="text" value="21017.39"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="15816.58"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

Form/Schedule: SD10

Transaction ID : SD10.16686

Schuyler, Roche, Crisham PC Debt-Adjusted by vendor--confirmed no balance due.

Form/Schedule:

Transaction ID:

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Starfish Consulting</b>		Nature of Debt (Purpose): Consulting on campaign communications and messaging
Mailing Address 118 N Clinton St Suite 102		
City	State	Zip Code
Chicago	IL	60661

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.8136</b>	
<input type="text" value="2000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JOE WALSH</b>		Nature of Debt (Purpose): Victory Night expenses - to be reimbursed
Mailing Address 29250 N. Gilmer Rd.		
City	State	Zip Code
Mundelein	IL	60060

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.6313</b>	
<input type="text" value="529.32"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="802.01"/>	<input type="text" value="1331.33"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>World Class Promotions</b>		Nature of Debt (Purpose): Bumper Stickers
Mailing Address 175 Olde Half Day Rd		
City	State	Zip Code
Lincolnshire	IL	60069

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.17810</b>	
<input type="text" value="1196.33"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1196.33"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="2000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="44231.91"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="44231.91"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.8136

Debt was paid in full. Amount has been adjusted to reflect no outstanding debt.

Form/Schedule:

Transaction ID: