24020451852
24020451852

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
04 JUL 15 PM 3:54
Office Use Only

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

Borling for Senate

ADDRESS (number and street) ▼: P.O. Box 1895

☐ Check if different than previously reported. (ACC)

CITY ▲: Rockford | STATE ▲: IL | ZIP CODE ▲: 61110

2. FEC IDENTIFICATION NUMBER ▼: C00390880

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

STATE ▼ DISTRICT: IL

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

☐ Termination Report (TER)

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

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

Election on ____ ____ ____ In the State of ____

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

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

Election on ____ ____ ____ In the State of ____

5. Covering Period: 04 01 2004 through 06 30 2004

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: Dawn T Milani

Signature of Treasurer: Electronically filed by Dawn T Milani — Date: 07 13 2004

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

Office Use Only							

FEC FORM 3
(Revised 02/2003)

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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Boring for Senate

Report Covering the Period: From: M M 04 D D 01 Y Y Y Y 2004 To: M M 06 D D 30 Y Y Y Y 2004

	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))	5775.00	186679.88
(b) Total Contribution Refunds (from Line 20(d))	0.00	600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5775.00	186079.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26749.30	296168.85
(b) Total Offsets to Operating Expenditures (from Line 14)	3045.60	3066.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	23703.70	293102.41
8. Cash on Hand at Close of Reporting Period (from Line 27)	3853.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	110876.29	

For further information contact:

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

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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003) — Page 3

Write or Type Committee Name
Boiling for Senate

Report Covering the Period: From: M M 04 D D 01 Y Y Y Y 2004 To: M M 06 D D 30 Y Y Y Y 2004

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	5500.00	
(ii) Unitemized	275.00	
(iii) TOTAL of contributions from individuals ▶	5775.00	186679.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACS)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	5775.00	186679.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate	10039.30	131876.29
(b) All Other Loans	0.00	7169.55
(c) TOTAL LOANS (add Lines 13(a) and (b))	10039.30	139045.84
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3045.60	3066.44
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	18859.90	328792.16

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	26749.30	296168.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	3000.00	21000.00
(b) Of all Other Loans	0.00	7169.55
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	3000.00	28169.55
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	600.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▷	29749.30	324938.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	14743.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	18859.90
25. SUBTOTAL (add Line 23 and Line 24)	33603.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	29749.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	3853.76

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Ms Anne Armstrong
Mailing Address P.O. Box 1358
City: Kingsville | State: TX | Zip Code: 78364
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 13 / 2004
Transaction ID: SA11A1.5831
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Chain
Mailing Address 2101 Indian Creek
City: Fort Worth | State: TX | Zip Code: 76107
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 04 / 12 / 2004
Transaction ID: SA11A1.5828
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Oliver Boyd Clow
Mailing Address 40 Riverview Court
City: Oswego | State: IL | Zip Code: 60543
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 750.00

Date of Receipt: 04 / 01 / 2004
Transaction ID: SA11A1.5829
Amount of Each Receipt this Period: 750.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Mr. James Dell
Mailing Address 1960 Harlem Blvd
City: Rockford | State: IL | Zip Code: 61103
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 600.00

Date of Receipt: 05 / 15 / 2004
Transaction ID: SA11A1.5848
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Marcena Love
Mailing Address 1175 Pelham Road
City: Winnetka | State: IL | Zip Code: 60093
FEC ID number of contributing federal political committee: C
Name of Employer: National Right to Choose Coalition
Occupation: Staff person
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 750.00

Date of Receipt: 06 / 10 / 2004
Transaction ID: SA11A1.5856
Amount of Each Receipt this Period: 750.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Mallott
Mailing Address 200 East Randolph
City: Chicago | State: IL | Zip Code: 60601
FEC ID number of contributing federal political committee: C
Name of Employer: None
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 01 / 2004
Transaction ID: SA11A1.5832
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7/64
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Borling for Senate

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

Mailing Address 150 Field Drive
Suite 100

City: Lake Forest | State: IL | Zip Code: 60045

FEC ID number of contributing federal political committee: C

Name of Employer: None
Occupation: Retired

Receipt For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 04 | 08 | 2004

Transaction ID: SA11A1.5833

Amount of Each Receipt this Period: 1000.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[X]

B. Full Name (Last, First, Middle Initial)
Deborah Vogelgesang

Mailing Address 203 Clay Street

City: Marion | State: AL | Zip Code: 36756

FEC ID number of contributing federal political committee: C

Name of Employer: None
Occupation: Homemaker

Receipt For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 | 03 | 2004

Transaction ID: SA11A1.5849

Amount of Each Receipt this Period: 500.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	5500.00

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 84
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Mr. John Borling
Mailing Address 1979 N. Harlem Blvd.
City: Rockford | State: IL | Zip Code: 61110
FEC ID number of contributing federal political committee: C
Name of Employer: PCG
Occupation: Chairman
Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 123366.29

Date of Receipt: 04 / 01 / 2004
Transaction ID: SA13A.5873
Amount of Each Receipt this Period: 1529.30
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. John Borling
Mailing Address 1979 N. Harlem Blvd.
City: Rockford | State: IL | Zip Code: 61110
FEC ID number of contributing federal political committee: C
Name of Employer: PCG
Occupation: Chalman
Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 123376.29

Date of Receipt: 04 / 21 / 2004
Transaction ID: SA13A.5835
Amount of Each Receipt this Period: 10.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. John Borling
Mailing Address 1979 N. Harlem Blvd.
City: Rockford | State: IL | Zip Code: 61110
FEC ID number of contributing federal political committee: C
Name of Employer: PCG
Occupation: Chairman
Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 131876.29

Date of Receipt: 05 / 31 / 2004
Transaction ID: SA13A.5869
Amount of Each Receipt this Period: 8500.00
Loan
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 10039.30

TOTAL This Period (last page this line number only) ▶ 10039.30

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 84
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Boeing for Senate

A. Full Name (Last, First, Middle Initial)
Cams International
Mailing Address 2622 N. Spaulding Avenue
City: Chicago | State: IL | Zip Code: 60647
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 04 01 2004
Transaction ID: SA14.5885
Amount of Each Receipt this Period: 1000.00
Reversal rebate
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
SBC Ameritech
Mailing Address N17W24300 Riverwood Drive
City: Waukesha | State: WI | Zip Code: 53188
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1729.42

Date of Receipt: 05 06 2004
Transaction ID: SA14.5847
Amount of Each Receipt this Period: 1708.58
Phone credit
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ron Swanson
Mailing Address 1704 Centerville
City: Rockford | State: IL | Zip Code: 61102
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation: landscaper
Receipt For: 2004 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 898.00

Date of Receipt: 04 30 2004
Transaction ID: SA14.5886
Amount of Each Receipt this Period: 250.00
Reversal rebate
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2958.58
TOTAL This Period (last page this line number only) ▶ 2958.58

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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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Borling for Senate

A.
Full Name (Last, First, Middle Initial)
DNR consulting
Mailing Address 212 West Washington
City: Chicago State: IL Zip Code: 60606
Purpose of Disbursement: Travel - Aviation
Category/Type: 002
Candidate Name: Borling for Senate
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5838
Date of Disbursement: 04 / 14 / 2004
Amount of Each Disbursement this Period: 209.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
excel Communications
Mailing Address PO Box 650582
City: Dallas State: TX Zip Code: 75265
Purpose of Disbursement: Telephone
Category/Type: 001
Candidate Name: Borling for Senate
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5862
Date of Disbursement: 08 / 16 / 2004
Amount of Each Disbursement this Period: 1084.05
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Hamilton Partners
Mailing Address 300 Park Blvd, Suite 500
City: Itasca State: IL Zip Code: 60143
Purpose of Disbursement: electric
Category/Type: 001
Candidate Name: Borling for Senate
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5840
Date of Disbursement: 04 / 16 / 2004
Amount of Each Disbursement this Period: 137.21
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1430.26

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

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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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Hilton Garden Inn

Mailing Address 700 East Adams Street

City: Springfield | State: IL | Zip Code: 62701

Purpose of Disbursement: Lodging

Candidate Name: Borling for Senate

003 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5880
Date of Disbursement: 04 / 24 / 2004

Amount of Each Disbursement this Period: 184.34

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Incisive Media

Mailing Address 120 S. Riverside Plaza

City: Chicago | State: IL | Zip Code: 60606

Purpose of Disbursement: Web processing

Candidate Name: Borling for Senate

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5852
Date of Disbursement: 04 / 01 / 2004

Amount of Each Disbursement this Period: 104.48

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Incisive Media

Mailing Address 120 S. Riverside Plaza

City: Chicago | State: IL | Zip Code: 60606

Purpose of Disbursement: Web services

Candidate Name: Borling for Senate

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5844
Date of Disbursement: 04 / 29 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 768.82

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

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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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Borling for Senate

A.
Full Name (Last, First, Middle Initial)
Ms Pat McLaughlin
Mailing Address 1104 Arden Avenue
City: Rockford | State: IL | Zip Code: 61107
Purpose of Disbursement: salary
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5839
Date of Disbursement: 04 / 19 / 2004
Amount of Each Disbursement this Period: 373.70
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Ms Pat McLaughlin
Mailing Address 1104 Arden Avenue
City: Rockford | State: IL | Zip Code: 61107
Purpose of Disbursement: salary
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5864
Date of Disbursement: 05 / 02 / 2004
Amount of Each Disbursement this Period: 225.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Ms Pat McLaughlin
Mailing Address 1104 Arden Avenue
City: Rockford | State: IL | Zip Code: 61107
Purpose of Disbursement: salary and reimbursement
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President
State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5883
Date of Disbursement: 06 / 23 / 2004
Amount of Each Disbursement this Period: 325.60
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 924.60

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

24020451864

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Borling for Senate

A.
Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address 120 Ogden Avenue

City: Downers Grove | State: IL | Zip Code: 60515

Purpose of Disbursement: Office supplies
Candidate Name: Borling for Senate
Category/ Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5883.0
Date of Disbursement: 06 / 13 / 2004

Amount of Each Disbursement this Period: 108.60

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Milani and Associates

Mailing Address 1125 W Oakdale

City: Chicago | State: IL | Zip Code: 60657

Purpose of Disbursement: Accounting
Candidate Name: Borling for Senate
Category/ Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5863
Date of Disbursement: 05 / 03 / 2004

Amount of Each Disbursement this Period: 1530.34

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Responsive Mailroom

Mailing Address 605 Sundown Road, #b

City: South Elgin | State: IL | Zip Code: 60177

Purpose of Disbursement: Advertising
Candidate Name: Borling for Senate
Category/ Type: 004

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.5845
Date of Disbursement: 05 / 06 / 2004

Amount of Each Disbursement this Period: 1495.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3025.34

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

24020451865

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Sherman Consulting

Mailing Address 858 W Armitage

City: Chicago | State: IL | Zip Code: 60614

Purpose of Disbursement: Advertising

Category/Type: 004

Candidate Name: Borling for Senate

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.5837
Date of Disbursement: 04 / 01 / 2004

Amount of Each Disbursement this Period: 10000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Sherman Consulting

Mailing Address 858 W Armitage

City: Chicago | State: IL | Zip Code: 60614

Purpose of Disbursement: mailing

Category/Type: 004

Candidate Name: Borling for Senate

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.5862
Date of Disbursement: 05 / 27 / 2004

Amount of Each Disbursement this Period: 10078.67

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
United States Postal Service - Rockford

Mailing Address East Rockford Station

City: Rockford | State: IL | Zip Code: 61107

Purpose of Disbursement: postage

Category/Type: 001

Candidate Name: Borling for Senate

Office Sought: [ ] House [X] Senate [ ] President
State: IL District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.5879
Date of Disbursement: 04 / 08 / 2004

Amount of Each Disbursement this Period: 3.85

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 20083.52

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

24020451866

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Dave Zapata
Mailing Address 1350 N. Wells
City Chicago | State IL | Zip Code 60610
Purpose of Disbursement: Supplies
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President — State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5865
Date of Disbursement: 06 / 02 / 2004
Amount of Each Disbursement this Period: 69.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Kinkos
Mailing Address 369 Army Trail Road
City Bloomingdale | State IL | Zip Code 60108
Purpose of Disbursement: supplies
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President — State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5865.0
Date of Disbursement: 06 / 02 / 2004
Amount of Each Disbursement this Period: 48.92
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dave Zapata
Mailing Address 1350 N. Wells
City Chicago | State IL | Zip Code 60610
Purpose of Disbursement: misc supply
Candidate Name: Borling for Senate
001 Category/Type
Office Sought: [ ] House [X] Senate [ ] President — State: IL District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.5870
Date of Disbursement: 06 / 14 / 2004
Amount of Each Disbursement this Period: 100.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 169.90

TOTAL This Period (last page this line number only) ▶ 26402.64

24020451867

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☒ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Borling for Senate

A. Full Name (Last, First, Middle Initial)
Mr. John Borling

Mailing Address 1979 N. Harlem Blvd.

City: Rockford | State: IL | Zip Code: 61110

Transaction ID: SB19A.5872
Date of Disbursement: 06 22 2004

Amount of Each Disbursement this Period: 3000.00

Purpose of Disbursement

Category/ Type

Candidate Name
Borling for Senate

Office Sought: ☐ House ☒ Senate ☐ President
State: IL District:

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify)

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	3000.00

24020451868
24020451868

SCHEDULE C (FEC Form 3)

LOANS

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

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

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4285

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 01 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	1000.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

24020451869

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4288

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
07 01 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	1500.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 9, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

24020451870
24020451870

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)
Borling for Senate

Transaction ID: SC/10.4289

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1345.00	0.00	1345.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
07 / 01 / 2003	12 / 31 / 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	1345.00
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.

24020451871

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)
Botling for Senate

Transaction ID: SC/10.4286

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Botling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
07 / 30 / 2003	12 / 31 / 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	1000.00
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.

24020451872

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4290

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
08 08 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 5000.00

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.

24020451873
24020451873

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 [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4332

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
[X] Primary
[ ] General
[ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7.68	0.00	7.68

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
08 / 13 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	7.68
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.

24020451874
24020451874

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4329

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7.18	0.00	7.18

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 14 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	7.18
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.

24020451875
24020451875

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 24 / 64

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

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10,4337

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
65.13	0.00	65.13

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 16 / 2003	12 / 31 / 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	65.13
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.

24020451876

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4331

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10.47	0.00	10.47

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
08 22 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	10.47
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.

24020451877

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4336

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
17.00	0.00	17.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
08 22 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	17.00
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.

24020451878

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4333

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15.96	0.00	15.96

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
08 / 23 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	15.96
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.

24020451879

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4325

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1879 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22.54	0.00	22.54

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 26 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	22.54
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.

24020451880
24020451880

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4688

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5.00	0.00	5.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
08 28 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	5.00
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.

24020451881

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4330

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10.57	0.00	10.57

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 01 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	10.57
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.

24020451882

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)
Borling for Senate

Transaction ID: SC/10.4738

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3.19	0.00	3.19

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 03 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	3.19
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.

24020451883

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)
Borling for Senate

Transaction ID: SC/10.4291

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 12 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	5000.00
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.

24020451884

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4317

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
512.50	0.00	512.50

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 12 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	512.50
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.

24020451885

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)
Borling for Senate

Transaction ID: SC/10.432B

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15.08	0.00	15.08

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 17 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	15.08
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.

24020451886

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)
Borling for Senate

Transaction ID: SC/10.4324

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12.93	0.00	12.93

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 22 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 12.93

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.

24020451887

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)
Borling for Senate

Transaction ID: SC/10.4326

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
37.00	0.00	37.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 23 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	37.00
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.

24020451888
24020451888

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)
Borling for Senate

Transaction ID: SC/10.4334

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8.05	0.00	8.05

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 23 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	8.05
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.

24020451889

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 [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4338

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
[X] Primary
[ ] General
[ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
19.15	0.00	19.15

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 23 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

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) ▶	19.15
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.

24020451890
24020451890

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)
Borling for Senate

Transaction ID: SC/10.4335

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8.20	0.00	8.20

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 26 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	8.20
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.

24020451891

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)
Borling for Senate

Transaction ID: SC/10.4206

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- ☒ Primary
- ☐ General
- ☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
70000.00	18000.00	52000.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 20 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	52000.00
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.

24020451892
24020451892

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4327

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6.62	0.00	6.62

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
09 29 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	6.62
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.

24020451893

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)
Borling for Senate

Transaction ID: SC/10.4708

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
358.75	0.00	358.75

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 01 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) | Name of Employer

Mailing Address | Occupation

City State ZIP Code | Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) | Name of Employer

Mailing Address | Occupation

City State ZIP Code | Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) | Name of Employer

Mailing Address | Occupation

City State ZIP Code | Amount Guaranteed Outstanding:

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) ▶	358.75
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.

24020451894
24020451894

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)
Borling for Senate

Transaction ID: SC/10.4893

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personel funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10.31	0.00	10.31

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
10 02 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	10.31
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.

24020451895

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4694

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7.36	0.00	7.36

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
10 04 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	7.36
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.

24020451896

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4692

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11.35	0.00	11.35

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 09 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	11.35
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.

24020451897

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)
Borling for Senate

Transaction ID: SC/10.4695

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
54.24	0.00	54.24

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 15 / 2003	12 / 31 / 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	54.24
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.

24020451898

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)
Borling for Senate

Transaction ID: SC/10.4861

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
522.75	0.00	522.75

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
10 31 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	522.75
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.

24020451899
24020451899

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4701

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 05 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Name of Employer
Mailing Address
Occupation
City State ZIP Code
Amount Guaranteed Outstanding:

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) ▶	200.00
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.

24020451900
24020451900

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)
Borling for Senate

Transaction ID: SC/10.4703

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
223.00	0.00	223.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 05 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 223.00

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.

24020451901
24020451901

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 50 / 64

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

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4704

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
223.00	0.00	223.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 05 2003	12 / 31 / 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 223.00

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.

24020451902
24020451902

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 51 / 64
	FOR LINE NUMBER: (check only one) ☐ 13a ☒ 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4697

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
☒ Primary
☐ General
☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
38.19	0.00	38.19

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 06 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	38.19
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.

24020451903

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4899

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22.02	0.00	22.02

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
11 08 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	22.02
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.

24020451904

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4700

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
225.04	0.00	225.04

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
11 / 08 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	225.04
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.

24020451905
24020451905

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)
Borling for Senate

Transaction ID: SC/10.4702

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 09 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	200.00
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.

24020451906

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4705

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
88.88	0.00	88.88

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
11 / 09 / 2003	12 / 31 / 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 88.88

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.

24020451907

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)
Borling for Senate

Transaction ID: SC/10.4696

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
16.82	0.00	16.82

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 12 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	16.82
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.

24020451908

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4707

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13.85	0.00	13.85

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
11 24 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	13.85
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.

24020451909

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.4862

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
410.00	0.00	410.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M D D Y Y Y Y)	Interest Rate	Secured:
12 01 2003	12 31 2004	0 % (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	410.00
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.

24020451910
24020451910

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)
Borling for Senate

Transaction ID: SC/10.4863

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
615.00	0.00	615.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
12 19 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	615.00
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.

24020451911

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)
Borling for Senate

Transaction ID: SC/10.4645

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
☒ Primary
☐ General
☐ Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
12 25 2003	12 31 2004	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	30000.00
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.

24020451912
24020451912

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)
Borling for Senate

Transaction ID: SC/10.5368

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling. - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2967.18	0.00	2967.18

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 25 2004	12/3	0 % (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 2967.18

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.

24020451913

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.5873

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1529.30	0.00	1529.30

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 01 2004	12/3	% (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	1529.30
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.

24020451914

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
- [X] 13b

NAME OF COMMITTEE (In Full)
Borling for Senate

Transaction ID: SC/10.5835

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election:
- [X] Primary
- [ ] General
- [ ] Other (specify)

Mailing Address 1879 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10.00	0.00	10.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 21 2004	12/31/2005	% (apr)	[ ] Yes [ ] No

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

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial)
Mailing Address
City State ZIP Code
Name of Employer
Occupation
Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	10.00
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.

24020451915
24020451915

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)
Borling for Senate

Transaction ID: SC/10.5889

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. John Borling, - Personal funds

Election: ☒ Primary ☐ General ☐ Other (specify)

Mailing Address 1979 N. Harlem Blvd.

City Rockford State IL ZIP Code 61110

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8500.00	3000.00	5500.00

TERMS

Date Incurred (M M D D Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
05 31 2004	11/04/2012	% (apr)	☐ Yes ☐ No

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

Full Name (Last, First, Middle Initial) — Name of Employer
Mailing Address — Occupation
City State ZIP Code — Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) — Name of Employer
Mailing Address — Occupation
City State ZIP Code — Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) — Name of Employer
Mailing Address — Occupation
City State ZIP Code — Amount Guaranteed Outstanding:

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) ▶	5500.00
TOTALS This Period (last page in this line only) ▶	110876.29

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

24020451916

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Recycled Paper

EXPRESS MAIL

UNITED STATES POSTAL SERVICE

U.S. POSTAGE PAID
CHICAGO, IL
60657
JUL 14, 04
AMOUNT
$13.65
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9251

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HOW TO USE:

ER992405449US

EXPRESS MAIL
UNITED STATES POSTAL SERVICE
Post Office To Addressee
Addressee Copy

ORIGIN (POSTAL USE ONLY)		
PO ZIP Code 60657	Day of Delivery ☒ Next ☐ Second	Flat Rate Envelope ☐
Date In 07/14/04	☒ 12 Noon ☐ 3 PM	Postage $ 13.65
Time In 11:13 ☐ AM ☐ PM	Military ☐ 2nd Day ☐ 3rd Day	Return Receipt Fee
Weight lbs 1/2 ozs	Int'l Alpha Country Code	COD Fee $ / Insurance Fee
No Delivery ☐ Weekend ☐ Holiday	Acceptance Clerk Initials	Total Postage & Fees $ 13.65

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt Mo. Day	Time ☐ AM ☐ PM	Employee Signature
Delivery Date Mo. 7 Day 15	Time 11:... ☐ AM ☐ PM	Employee Signature

CUSTOMER USE ONLY

PAYMENT BY ACCOUNT
Express Mail Corporate Acct. No.

Federal Agency Acct. No. or Postal Service Acct. No.

☐ WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY ☐ Weekend ☐ Holiday

Customer Signature

FROM: (PLEASE PRINT)

TO: (PLEASE PRINT)

PHONE ( )

ZIP + 4

FOR PICKUP OR TRACKING CALL 1-800-222-1811
www.usps.com

02/03

SENATE POST OFFICE
SCREENED BY

24020451917
24020451917

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt

_____REGISTERED/CERTIFIED MAIL_____
Postmarked

_____RECEIVED FROM THE FEDERAL ELECTION COMMISSION_____
Date of Receipt

DELIVERY CONFIRMATION/ON LINE TRACKING SYSTEM
_____PRIORITY MAIL /WITH CONFIRMATION SHEET
__✓__EXPRESS MAIL
_____FEDERAL EXPRESS
_____UPS
_____AIRBORNE EXPRESS 07-14-04
Postmark

_____PRIORITY MAIL (NO CONFIRMATION)_____
Date of Receipt

_____FIRST CLASS MAIL_____
Date of Receipt

_____FAX _____
Date of Receipt

_____NO POSTMARK _____POSTMARK ILLEGIBLE

_____OTHER_____
Date of Receipt

RD 07-15-04
Preparer Date Prepared

24020451918