

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Robin Ficker 2012

ADDRESS (number and street) 16711 Barnesville Road
 Check if different than previously reported. (ACC) Boys MD 20841

2. **FEC IDENTIFICATION NUMBER** ▼ C C00506691 CITY ▲ STATE ▲ ZIP CODE ▲
3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE ▼ DISTRICT
MD 06

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 04 / 03 / 2012 in the State of MD
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 01 / 01 / 2012 through 03 / 14 / 2012

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 Amy Marie Ginther
Signature of Treasurer Amy Marie Ginther [Electronically Filed] Date 08 / 14 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Robin Ficker 2012

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1360.17	1383.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1360.17	1383.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	95137.86	
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).....	127034.46	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Robin Ficker 2012

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(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))..	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	117977.91	127034.46
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	117977.91	127034.46
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	117977.91	127034.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1360.17	1383.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	21571.74	30513.43
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	22931.91	31896.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	91.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	117977.91
25. SUBTOTAL (add Line 23 and Line 24).....	118069.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22931.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	95137.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
9406.55

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 07 / 2012

Transaction ID : SA13A.4154

Amount of Each Receipt this Period
350.00
loan for emailing expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
9766.55

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 10 / 2012

Transaction ID : SA13A.4156

Amount of Each Receipt this Period
360.00
loan for emailing expense

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
10288.55

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2012

Transaction ID : SA13A.4158

Amount of Each Receipt this Period
522.00
loan for emailing expense, database development

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

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

1232.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
11338.55

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 16 / 2012

Transaction ID : SA13A.4159

Amount of Each Receipt this Period
1050.00
 loan for Robocall expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
11693.55

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 23 / 2012

Transaction ID : SA13A.4160

Amount of Each Receipt this Period
355.00
 loan for emailing expense

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
12743.55

Date of Receipt
 M M / D D / Y Y Y Y Y
02 / 01 / 2012

Transaction ID : SA13A.4161

Amount of Each Receipt this Period
1050.00
 loan for Robocall expense

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

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

2455.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
12753.72

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2012

Transaction ID : SA13A.4162

Amount of Each Receipt this Period
 10.17
 loan for domain name registration expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
13164.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2012

Transaction ID : SA13A.4163

Amount of Each Receipt this Period
 410.74
 loan for post card expense

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
14514.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2012

Transaction ID : SA13A.4164

Amount of Each Receipt this Period
 1350.00
 loan for stamps for post card postage

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

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

1770.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
14894.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2012

Transaction ID : SA13A.4165

Amount of Each Receipt this Period
 380.00
 loan for emailing expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
15074.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2012

Transaction ID : SA13A.4166

Amount of Each Receipt this Period
 180.00
 loan for server memory

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
15214.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2012

Transaction ID : SA13A.4167

Amount of Each Receipt this Period
 140.00
 loan for studio time expense

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
16214.46

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2012

Transaction ID : SA13A.4168

Amount of Each Receipt this Period
 1000.00
 loan for website design

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
16574.46

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA13A.4169

Amount of Each Receipt this Period
 360.00
 loan for emailing expense

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
26424.46

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2012

Transaction ID : SA13A.4170

Amount of Each Receipt this Period
 9850.00
 loan for radio advertising expenses

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

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

11210.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
26484.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2012

Transaction ID : SA13A.4171

Amount of Each Receipt this Period
 60.00
 loan for studio time

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
26664.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2012

Transaction ID : SA13A.4172

Amount of Each Receipt this Period
 180.00
 loan for server memory

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
26984.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2012

Transaction ID : SA13A.4173

Amount of Each Receipt this Period
 320.00
 loan for absentee voter database development; search engine optimization

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

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

560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
28034.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 20 / 2012

Transaction ID : SA13A.4174

Amount of Each Receipt this Period
 1050.00
 loan for Robocall expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
29034.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2012

Transaction ID : SA13A.4175

Amount of Each Receipt this Period
 1000.00
 loan for deposit to Capitol One Bank checking account for yard sign order

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
29394.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA13A.4176

Amount of Each Receipt this Period
 360.00
 loan for emailing expense

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

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

2410.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
30444.46

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2012

Transaction ID : SA13A.4177

Amount of Each Receipt this Period
1050.00
loan for Robocall expense

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
31319.46

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2012

Transaction ID : SA13A.4178

Amount of Each Receipt this Period
875.00
loan for website social media site upkeep; server memory: search engine optimization

C. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boys MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
31674.46

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2012

Transaction ID : SA13A.4179

Amount of Each Receipt this Period
355.00
loan for emailing expense

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

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

2280.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 62
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

A. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boyd MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
126674.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SA13A.4180

Amount of Each Receipt this Period
95000.00
 loan to campaign account

B. Full Name (Last, First, Middle Initial)
Robin Keith Ficker

Mailing Address 16711 Barnesville Road

City State Zip Code
Boyd MD 20841

FEC ID number of contributing federal political committee. **C H4MD08171**

Name of Employer self Occupation attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
127034.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 14 / 2012

Transaction ID : SA13A.4181

Amount of Each Receipt this Period
360.00
 loan for social media site upkeep and search engine optimization tasks

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

Mailing Address

City State Zip Code

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

Name of Employer self Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

95360.00

117977.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 62			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 7400 Wisconsin Ave.		Amount of Each Disbursement this Period 1350.00 Transaction ID : SB17.4183
City Bethesda	State MD	
Zip Code 20814	Purpose of Disbursement stamps for postcard mailings	Category/ Type 001
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MD District: 06	

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

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

SUBTOTAL of Disbursements This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 62
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Got Print		Date of Disbursement MM / DD / YYYY 02 / 03 / 2012
Mailing Address 7625 N. San Fernando Rd		Amount of Each Disbursement this Period 410.74 Transaction ID : SB21.4189
City Burbank State CA Zip Code 91505	Purpose of Disbursement literature--post cards for mailings, distribution at events Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Gravis Marketing		Date of Disbursement MM / DD / YYYY 01 / 16 / 2012
Mailing Address 910 Belle Ave., Suite 1042		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB21.4190
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robocall Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Gravis Marketing		Date of Disbursement MM / DD / YYYY 02 / 01 / 2012
Mailing Address 910 Belle Ave., Suite 1042		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB21.4191
City Winter Springs State FL Zip Code 32708	Purpose of Disbursement Robocall Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	2510.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 62
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 910 Belle Ave., Suite 1042		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB21.4192
City Winter Springs	State FL	
Zip Code 32708	Purpose of Disbursement Robocall	Category/ Type 004
Candidate Name Robin Ficker 2012	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Gravis Marketing		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 910 Belle Ave., Suite 1042		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB21.4193
City Winter Springs	State FL	
Zip Code 32708	Purpose of Disbursement Robocall	Category/ Type 004
Candidate Name Robin Ficker 2012	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Internet PC Solutions, Matt Sinsen		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 350.00 Transaction ID : SB21.4207
City Philadelphia	State PA	
Zip Code 19107	Purpose of Disbursement emailing design and distribution	Category/ Type 004
Candidate Name Robin Ficker 2012	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	2450.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 01 / 10 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 360.00 Transaction ID : SB21.4208
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 01 / 15 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 522.00 Transaction ID : SB21.4209
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution; database development Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 01 / 23 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 355.00 Transaction ID : SB21.4210
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	1237.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 05 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 380.00 Transaction ID : SB21.4211
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 07 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 180.00 Transaction ID : SB21.4212
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement charge for demand on server memory; database development Category/Type 001	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 10 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.4213
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement website design; video editing Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	1560.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 13 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 360.00 Transaction ID : SB21.4214
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 180.00 Transaction ID : SB21.4215
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement charge for demand on server memory Category/Type 001	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 19 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 320.00 Transaction ID : SB21.4216
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement database development for absentee voter mailings; search engine optimization Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	860.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 360.00 Transaction ID : SB21.4217
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 03 / 03 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 875.00 Transaction ID : SB21.4218
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement website, social media site upkeep; server demand; search engine optimization; database development Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Internet PC Solutions, Matt Sinsen		Date of Disbursement MM / DD / YYYY 03 / 08 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 355.00 Transaction ID : SB21.4219
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement emailing design and distribution of videos, absentee ballot instructions; website upkeep Category/Type 004	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	1590.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 314 N. 12th Apt. 804		Amount of Each Disbursement this Period 360.00 Transaction ID : SB21.4220
City Philadelphia State PA Zip Code 19107	Purpose of Disbursement search engine optimization; website design adjustment 004 Category/Type	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. PR Promotions, Mark Weiss Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address P.O. Box 34407		Amount of Each Disbursement this Period 954.00 Transaction ID : SB21.4194
City Bethesda State MD Zip Code 20827	Purpose of Disbursement yard signs 004 Category/Type	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) c. Radio WTOP		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address 3400 Idaho Avenue, NW		Amount of Each Disbursement this Period 9850.00 Transaction ID : SB21.4221
City Washington State DC Zip Code 20016	Purpose of Disbursement radio advertising 004 Category/Type	
Candidate Name Robin Ficker 2012	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

SUBTOTAL of Disbursements This Page (optional).....	11164.00
TOTAL This Period (last page this line number only).....	21371.74

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)
Robin Ficker 2012

Transaction ID : SC/10.4113

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 10 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1500.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4120

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100.00 0.00 100.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 13 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ▶ 100.00
TOTALS This Period (last page in this line only) ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4121

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00
-----------------------------------	------------------------------------	---

TERMS

Date Incurred: M 11 / D 14 / Y 2011
Date Due: M / D / Y 11/6/12
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 500.00
TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4123

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
400.00 0.00 400.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 16 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 400.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4125

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
350.00 0.00 350.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 18 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 350.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4127

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
500.00 0.00 500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
11 / 20 / 2011 M M / D D / Y Y / Y Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 500.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4129

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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:
M 11 / D 26 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4132

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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:
M 11 / D 29 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4134

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1029.30 0.00 1029.30

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 01 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 1029.30

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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4137

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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:
M 12 / D 07 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robin Ficker 2012** Transaction ID : **SC/10.4139**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Robin Keith Ficker Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address 16711 Barnesville Road
 City: Boyds State: MD ZIP Code: 20841

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
637.25	0.00	637.25

TERMS
 Date Incurred: M 12 / D 08 / Y 2011 Date Due: M / D / Y 11/6/12 Interest Rate: 0.00 % (apr) Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 637.25
TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4142

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
950.00 0.00 950.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 21 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 950.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4144

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
330.00 0.00 330.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 21 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 330.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4146

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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:
M 12 / D 22 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4148

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
360.00 0.00 360.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 30 / Y 2011 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 360.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4154

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
350.00 0.00 350.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 07 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 350.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4156

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
360.00 0.00 360.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 10 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 360.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robin Ficker 2012** Transaction ID : **SC/10.4158**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Robin Keith Ficker Primary
 Mailing Address 16711 Barnesville Road General
 Other (specify) ▼

City State ZIP Code
 Boyds MD 20841

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
522.00	0.00	522.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 / 15 / 2012	11/6/12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	522.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4159

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1050.00 0.00 1050.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 16 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1050.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4160

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
355.00 0.00 355.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 23 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 355.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4161

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1050.00 0.00 1050.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 01 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1050.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4162

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10.17 0.00 10.17

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 02 / 2012 M M / D D / Y Y / 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4163

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
410.74	0.00	410.74

TERMS

Date Incurred: M 02 / D 03 / Y 2012
 Date Due: M M / D D / Y 11/6/12
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	410.74
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4164

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1350.00 0.00 1350.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 03 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 1350.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4165

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
380.00 0.00 380.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 05 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 380.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4166

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
180.00 0.00 180.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 07 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 180.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4167

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
140.00 0.00 140.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 10 / 2012 M M / D D / Y Y/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 140.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robin Ficker 2012** Transaction ID : **SC/10.4168**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Robin Keith Ficker Primary
 Mailing Address General
 16711 Barnesville Road Other (specify) ▼

City State ZIP Code
 Boyds MD 20841

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

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No
 02 10 / 2012 11/6/12

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4169

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
360.00 0.00 360.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 13 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 360.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4170

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
9850.00 0.00 9850.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 14 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 9850.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4171

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
60.00 0.00 60.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 15 / 2012 M M / D D / Y Y/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 60.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4172

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
180.00 0.00 180.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 17 / 2012 M M / D D / Y Y/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 180.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4173

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
320.00 0.00 320.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 19 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 320.00
TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4174

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1050.00 0.00 1050.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 1050.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4175

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

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:
02 / 21 / 2012 M M / D D / Y Y/6/12 Y 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 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.

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)
Robin Ficker 2012

Transaction ID : SC/10.4176

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
360.00 0.00 360.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 27 / 2012 M M / D D / Y Y/6/12 Y 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 360.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4177

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1050.00 0.00 1050.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 01 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1050.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4178

LOAN SOURCE Full Name (Last, First, Middle Initial)

Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
875.00 0.00 875.00

TERMS

Date Incurred Date Due Interest Rate Secured:
03 / 03 / 2012 M M / D D / Y Y/6/12 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 875.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4179

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boys MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
355.00 0.00 355.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 08 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 355.00

TOTALS This Period (last page in this line only).....

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Robin Ficker 2012

Transaction ID : SC/10.4180

LOAN SOURCE Full Name (Last, First, Middle Initial)
Robin Keith Ficker

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
16711 Barnesville Road

City State ZIP Code
Boysd MD 20841

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
95000.00 0.00 95000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 13 / Y 2012 M M / D D / Y 11/6/12 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 95000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Robin Ficker 2012** Transaction ID : **SC/10.4181**

LOAN SOURCE Full Name (Last, First, Middle Initial) Robin Keith Ficker	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 16711 Barnesville Road		

City	State	ZIP Code
Boysd	MD	20841

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
360.00	0.00	360.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 14 / Y 2012	M M / D D / Y 11/6/12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	360.00
TOTALS This Period (last page in this line only).....	127034.46

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