08/14/2012 10:08

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 2	For An	Authorized Co	mmittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typin over the lines.	g, type	12FE4M5	
Robin Ficker 2012						
I						
	ı 16711 Barnes	ville Road				
ADDRESS (number and street)	Tor Tr Barries	VIIIC TOOLU				
Check if different						
than previously reported. (ACC)	Boyds				MD	20841
2. FEC IDENTIFICATION N	UMBER ▼	CITY A			STATE A	ZIP CODE
C C00506691		3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	STATE ▼ DISTRICT DED MD 06 □ □ □
4. TYPE OF REPORT (CH	noose One)	<u> </u>				
(a) Quarterly Reports:	0110)	(b) 12-Day PF	RE-Election Repo	ort for the:		_
April 15 Quarterly	Report (O1)	×	Primary (12P)	General (1	12G) Runoff (12R)
			Convention (12C)	Special (1	2S)
July 15 Quarterly F	Report (Q2)		M M /	D D /	Y Y Y Y	in the
October 15 Quarte	erly Report (Q3)	Election of	n 04	03	2012	State of MD
January 31 Year-E	nd Report (YE)	(c) 30-Day PC	ST-Election Rep	port for the:		
			General (30G	i)	Runoff (30	DR) Special (30S)
Termination Report	: (TER)	Election o	m = M /	D D /	Y " Y " Y	in the State of
5. Covering Period 0	M / 01	y y y y y 2012	through	M M 03	/ D D /	Y Y Y Y Y 2012
I certify that I have examined th	his Report and to	o the best of my	knowledge and	belief it is tr	ue, correct and	d complete.
Type or Print Name of Treasure	Amy Marie G	inther				
Signature of Treasurer Amy	y Marie Ginther		[Electronically I	Filed] [Date 08	/ D D / Y Y Y Y Y 14 2012
NOTE: Submission of false, error	eous, or incompl	ete information ma	y subject the per	son signing t	this Report to th	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or	, ,		
Robin	Ficke	er 2012	

01 03 2012 01 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 1360.17 1383.17 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1360.17 1383.17 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 95137.86 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 127034.46 Schedule C and/or Schedule D).....

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

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

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	~ ^	nın	-ICVAR	- 71 17	
	`'		Ficker	/ (<i>)</i>	_

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (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 Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	TRANSFERS FROM OTHER	0.00	0.00
	AUTHORIZED COMMITTEES	, , , , , ,	7
	_OANS: 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
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	DTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	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

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	1360.17	1383.17
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
			0.00	0.00
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	(-)	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTI	HER DISBURSEMENTS	21571.74	30513.43
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	22931.91	31896.60
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	91.86
24	то	TAL RECEIPTS THIS PERIOD (from Line	16, page 3)	117977.91
25.	SUI	BTOTAL (add Line 23 and Line 24)		118069.77
26.	то	TAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	22931.91
7	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	95137.86

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 5 OF 62 (check only one)
I EIVIIZED NECEIP 13		Detailed Summary Page	12 X 13a 13b 14 15
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 45744 Person illa Person			Date of Receipt
Mailing Address 16711 Barnesville Road			01 07 2012
City	State	Zip Code	Transaction ID : SA13A.4154
Boyds	MD	20841	_
FEC ID number of contributing federal political committee.	C H4	MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	٦	
self	attorney		loan for emailing expense
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 9406.55]
Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
Mailing Address 16711 Barnesville Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4156
FEC ID number of contributing federal political committee.	С н4	MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	1	360.00
self Receipt For: 2012	attorney		loan for emailing expense
Primary General	Election C	ycle-to-Date	
Other (specify)		9766.55	
Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
Mailing Address 16711 Barnesville Road			01 15 2012
City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4158
FEC ID number of contributing federal political committee.	С н4	MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	1	522.00
self	attorney		loan for emailing expense, database developmen
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 10288.55	1
SUBTOTAL of Receipts This Page (optional).		, , , , , , , , , , , , , , , , , , , ,	1232.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 6 OF 62 (check only one)
	EMIZED RECEIPTS		Detailed Summary Page	12 X 13a 13b 14 15
	y information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Α.	Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
	Mailing Address 16711 Barnesville Road			01 16 2012
	City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4159
	FEC ID number of contributing federal political committee.	С ни	MD08171	Amount of Each Receipt this Period
	Name of Employer self	Occupation	1	loan for Robocall expense
	Receipt For: 2012 Primary General Other (specify)		ycle-to-Date 11338.55	
_	Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
о.	Mailing Address 16711 Barnesville Road			01 23 2012
	City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4160
	FEC ID number of contributing federal political committee.	C H41	MD08171	Amount of Each Receipt this Period
	· · · · · · · · · · · · · · · · · · ·	C H41		Amount of Each Receipt this Period 355.00 loan for emailing expense
	federal political committee. Name of Employer self Receipt For: 2012	Occupation attorney		355.00
	federal political committee. Name of Employer self	Occupation attorney	1	355.00
	federal political committee. Name of Employer self Receipt For: 2012 Primary General	Occupation attorney	ycle-to-Date	355.00
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation attorney	ycle-to-Date	loan for emailing expense
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker	Occupation attorney	ycle-to-Date	Jate of Receipt
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City	Occupation attorney Election Co	ycle-to-Date 11693.55 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer	Occupation attorney Election Company State MD C H4	Zip Code 20841	Date of Receipt Date of Receipt
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self	Occupation attorney Election Company State MD C H4 Occupation attorney	Zip Code 20841	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer	Occupation attorney Election Company State MD C H4 Occupation attorney	Zip Code 20841	Date of Receipt Date of Receipt
C.	federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General	Occupation attorney Election Comparison State MD C H4 Occupation attorney Election Comparison	Zip Code 20841 MD08171 vycle-to-Date	Date of Receipt Date of Receipt

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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 62 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
Mailing Address 16711 Barnesville Road			02 02 _2012 _
City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4162
FEC ID number of contributing federal political committee.	С н4	MD08171	Amount of Each Receipt this Period
Name of Employer self	Occupation attorney	n	loan for domain name registration expense
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 12753.72]
Full Name (Last, First, Middle Initial) B. Robin Keith Ficker Mailing Address 1974 P			Date of Receipt
Mailing Address 16711 Barnesville Road City	State	Zip Code	02 03 2012
Boyds	MD	20841	Transaction ID : SA13A.4163
FEC ID number of contributing federal political committee.	C H4	MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	n	410.74
self	attorney		loan for post card expense
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 13164.46	
Full Name (Last, First, Middle Initial) C. Robin Keith Ficker			Date of Receipt
Mailing Address 16711 Barnesville Road	Mailing Address 16711 Barnesville Road		
City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4164
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation	n	1350.00
self	attorney		loan for stamps for post card postage
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 14514.46	
			1770.91

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

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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 8 OF 62 (check only one) 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General			Date of Receipt 02
Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify)		Code 1841	Date of Receipt 02
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify)			Date of Receipt M M M / D D / 2012 Transaction ID : SA13A.4167 Amount of Each Receipt this Period 140.00 loan for studio time expense
SUBTOTAL of Receipts This Page (optional)			700.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 62 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15
				person for the purpose of soliciting contributions tee to solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Α.	Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road			Date of Receipt
	City	State	Zip Code	02 10 2012
	Boyds	MD	20841	Transaction ID : SA13A.4168
	FEC ID number of contributing federal political committee.	С н4	IMD08171	Amount of Each Receipt this Period
	Name of Employer self	Occupation attorney		loan for website design
	Receipt For: 2012 Primary General Other (specify)	Election C	Cycle-to-Date	
В.	Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
	Mailing Address 16711 Barnesville Road	01.1	7: 0 1	02 13 2012
	City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4169
	FEC ID number of contributing federal political committee.	С н41	MD08171	Amount of Each Receipt this Period
	Name of Employer self	Occupation attorney	n	loan for emailing expense
	Receipt For: 2012 Primary General Other (specify)	Election C	Cycle-to-Date	
_	Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
Ο.	Mailing Address 16711 Barnesville Road			02 / 14 / 2012
	City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4170
	FEC ID number of contributing federal political committee.	С н4	4MD08171	Amount of Each Receipt this Period
	Name of Employer self	Occupation attorney		9850.00 loan for radio advertising expenses
	Receipt For: 2012 Primary General Other (specify)	Election C	Cycle-to-Date 26424.46	
s	UBTOTAL of Receipts This Page (optional)			11210.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 62 (check only one) 11a 11b 11c 11d 12 X 13a 13b 14 15
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Robin Ficker 2012		
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road		Date of Receipt
City	State Zip Code	02 15 2012
Boyds	MD 20841	Transaction ID : SA13A.4171
FEC ID number of contributing federal political committee.	С Н4МD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	60.00
self	attorney	loan for studio time
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 26484.46	
Full Name (Last, First, Middle Initial) Robin Keith Ficker		Date of Receipt
Mailing Address 16711 Barnesville Road		02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boyds	State Zip Code MD 20841	Transaction ID : SA13A.4172
FEC ID number of contributing federal political committee.	C H4MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	180.00
self	attorney	loan for server memory
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 26664.46	
Full Name (Last, First, Middle Initial)		
c. Robin Keith Ficker		Date of Receipt
Mailing Address 16711 Barnesville Road		02 19 2012
City	State Zip Code	Transaction ID : SA13A.4173
Boyds	MD 20841	Transaction in . SA 13A.4173
FEC ID number of contributing federal political committee.	C H4MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	320.00
self	attorney	loan for absentee voter database development; searc
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 26984.46	engine optimization
SUBTOTAL of Receipts This Page (optional)		560.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 62 (check only one) 11a 11b 11c 11d 12 X 13a 13b 14 15
		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify)	State Zip Code MD 20841 C H4MD08171 Occupation attorney Election Cycle-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify)	State Zip Code MD 20841 C H4MD08171 Occupation attorney Election Cycle-to-Date	Date of Receipt M M / D D / Y Y Y Y Y O2 21 2012 Transaction ID : SA13A.4175 Amount of Each Receipt this Period 1000.00 loan for deposit to Capitol One Bank checking accour for vard sign order
Full Name (Last, First, Middle Initial) Robin Keith Ficker Mailing Address 16711 Barnesville Road City Boyds FEC ID number of contributing federal political committee. Name of Employer self Receipt For: 2012 Primary General Other (specify)	State Zip Code MD 20841 C H4MD08171 Occupation attorney Election Cycle-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		2410.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

)K LINE I	NUI	MBER:	PAGE	12	2 OF		62
neck only	on	ie)					
11a		11b	11c	1	1d		
12	×	13a	13b	-	14		15
	neck only	neck only on	neck only one)	neck only one)	neck only one)	leck only one)	leck only one)

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 Full Name (Last, First, Middle Initial) Robin Keith Ficker Date of Receipt Mailing Address 16711 Barnesville Road 2012 01 City State Zip Code Transaction ID: SA13A.4177 MD 20841 Boyds FEC ID number of contributing Amount of Each Receipt this Period H4MD08171 federal political committee. 1050.00 Name of Employer Occupation loan for Robocall expense self attorney Receipt For: 2012 Election Cycle-to-Date Primary General 30444.46 Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Date of Receipt Mailing Address 16711 Barnesville Road 03 2012 City State Zip Code Transaction ID: SA13A.4178 Boyds MD 20841 FEC ID number of contributing Amount of Each Receipt this Period С H4MD08171 federal political committee. 875.00 Name of Employer Occupation attorney loan for website social media site upkeep; server self memory; search engine optimization Receipt For: 2012 Election Cycle-to-Date | Primary General 31319.46 Other (specify) Full Name (Last, First, Middle Initial) Robin Keith Ficker Date of Receipt Mailing Address 16711 Barnesville Road 2012 80 City State Zip Code Transaction ID: SA13A.4179 MD 20841 Boyds FEC ID number of contributing С H4MD08171 Amount of Each Receipt this Period federal political committee. 355.00 Name of Employer Occupation self attorney loan for emailing expense Receipt For: 2012 Election Cycle-to-Date Primary General 31674.46 Other (specify) 2280.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 62 (check only one) 11a
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Full Name (Last, First, Middle Initial) Robin Keith Ficker			
A. Mailing Address 16711 Barnesville Ro	ead		Date of Receipt
	State	Zip Code	03 13 2012
City Boyds	MD	20841	Transaction ID : SA13A.4180
FEC ID number of contributing federal political committee.	С н4	MD08171	Amount of Each Receipt this Period
Name of Employer self	Occupation attorney	n	95000.00 loan to campaign account
Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 126674.46	
Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt
Mailing Address 16711 Barnesville Road			03 / 14 / 2012
City Boyds	State MD	Zip Code 20841	Transaction ID : SA13A.4181
FEC ID number of contributing federal political committee.	С н4	MD08171	Amount of Each Receipt this Period
Name of Employer	Occupation	n	360.00
self Receipt For: 2012	attorney		loan for social media site upkeep and search engir optimization tasks
Primary General Other (specify)	Election C	ycle-to-Date 127034.46	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	
FEC ID number of contributing federal political committee.	, ,		Amount of Each Receipt this Period
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	
SUBTOTAL of Receipts This Page (opt	ional)		95360.00

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

117977.91

S

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the bottled Surmary Page 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 communities. ANAME OF COMMITTEE (in Full) Robin Ficker 2012 Full Name (Last, First, Middle Initial) A. USPS Mailing Address 7400 Wisconsin Ave. City Bethestor Candidate Name Robin Ficker 2012 Office Sought: State: MD Datact Of Disbursement State: Districts Disbursement Candidate Name Office Sought: State: Districts City State Disbursement Candidate Name Office Sought: Formacy State Disbursement Candidate Name Office Sought: Formacy Office Sough					
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 Full Name (Last, First, Middle Initial) A. USPS Mailing Address 7400 Wisconsin Ave. City State Zip Code Betheads MD 20814 Purpose of Disbursement this Period Category/ Robin Ficker 2012 Office Sought: House Senate President State: District: 06 Full Name (Last, First, Middle Initial) B. Date of Disbursement this Period Mailing Address City State Zip Code Furpose of Disbursement Gandidate Name Category/ Office Sought: House Senate President State: District: Office Sought: Senate President State: District: Gandidate Name Office Sought: House Disbursement For: State: District: Gandidate Name Office Sought: House Disbursement For: State: District: Gandidate Name Office Sought: House Disbursement For: State: District: Gandidate Name Office Sought: House Disbursement For: Category/			for each category	of the	(check only one) X 17 18 19a 19b
Robin Ficker 2012 Full Name (Last, First, Middle Initial) A. USPS Mailing Address 7400 Wisconsin Ave. City State Zip Code Bethesda Purpose of Disbursement Stange for postcard mailings Candidate Name Robin Ficker 2012 Office Sought: State: MD District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Full Name (Last, First, Middle Initial) B. Mailing Address City State: Disbursement Candidate Name Office Sought: State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement Amount of Each Disbursement Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period					
A. USPS Mailing Address 7400 Wisconsin Ave. City State Zip Code Bethesda MD 20814 Purpose of Disbursement stamps for postcard mailings Candidate Name Other (specify) Date of Disbursement this Period Transaction ID: SB17.4183 Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: SB17.4183 Transaction ID: SB17.4183 Date of Disbursement this Period Transaction ID: SB17.4183 Date of Disbursement this Period Transaction ID: SB17.4183 Date of Disbursement Trans		• • •			
City State Zip Code Bethesda MD 20814 Purpose of Disbursement stamps for postcard mailings Candidate Name Robin Ficker 2012 Office Sought: House Senate President Disbursement For: 2012 Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement For: Senate President Disbursement For:	Α.				
Bethesda		Mailing Address 7400 Wisconsin Ave.			02 03 2012
stamps for postcard mailings Candidate Name Robin Ficker 2012 Office Sought:					
Robin Ficker 2012 Office Sought:		stamps for postcard mailings			
Senate President Other (specify) State: MD District: 06 Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Category/ Type Office Sought: State Zip Code Amount of Each Disbursement Category/ Type Office Sought: State Zip Code Amount of Each Disbursement this Period Category/ Type Office Sought: General Other (specify) Office Sought: General Other (specify)		Robin Ficker 2012	·: 2012		
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Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Date of Disbursement M M M / D D / Y Y Y Y Y Y Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: Office Senate Primary General Office Sought: Office Senate Primary General Office Sought: Office Senate Primary General Office Specify)		Full Name (Last, First, Middle Initial)			Balant Balance
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)	B.	Mailing Address			
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Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)		Candidate Name			
Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify)		Senate Primary	General		
City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Date of Disbursement Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)	_				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)	C.	Full Name (Last, First, Middle Initial)			Date of Disbursement
Purpose of Disbursement Candidate Name Category/ Type Office Sought: Bisbursement For: Senate Primary General Other (specify)		Mailing Address			M M / D D / Y Y Y
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify)			p Code		Amount of Each Disbursement this Period
Office Sought: House Senate President Disbursement For: General Other (specify)					
Senate Primary General President Other (specify)					
		Senate Primary	General		

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

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

1350.00

1350.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 OF 62 (check only one) 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full)		
Robin Ficker 2012		
Full Name (Last, First, Middle Initial) A. Got Print Mailing Address 7625 N. San Fernando Rd		Date of Disbursement O2 03 2012
City State Burbank CA	Zip Code 91505	Amount of Each Disbursement this Period
Purpose of Disbursement literaturepost cards for mailings, distribution at events Candidate Name	004	410.74 Transaction ID : SB21.4189
Robin Ficker 2012 Office Sought: House Senate President President State: MD District: 06 Disbursement For Primary Other (s	General	
Full Name (Last, First, Middle Initial) Gravis Marketing Mailing Address 910 Belle Ave., Suite 1042		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Winter Springs FL Purpose of Disbursement Robocall	Zip Code 32708	Amount of Each Disbursement this Period
Candidate Name Robin Ficker 2012 Office Sought:	Category Type	Transaction ID : SB21.4190
Senate President Other (s	General pecify)	
Full Name (Last, First, Middle Initial) Gravis Marketing		Date of Disbursement
Mailing Address 910 Belle Ave., Suite 1042		02 01 2012
	p Code 2708 004	Amount of Each Disbursement this Period
Candidate Name Robin Ficker 2012 Office Sought: House Senate President State: MD District Office Sought	General	Transaction ID : SB21.4191
State: MD District: 06 SUBTOTAL of Disbursements This Page (optional)		2510.74

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 OF 62 (check only one) 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) Robin Ficker 2012		
Full Name (Last, First, Middle Initial) A. Gravis Marketing Mailing Address 910 Belle Ave., Suite 1042		Date of Disbursement O2 20 2012
City State Winter Springs FL Purpose of Disbursement Robocall Candidate Name Robin Ficker 2012 Office Sought: House Senate President State: MD District: 06	General	Amount of Each Disbursement this Period 1050.00 Transaction ID: SB21.4192
Full Name (Last, First, Middle Initial) Gravis Marketing Mailing Address 910 Belle Ave., Suite 1042 City State Winter Springs FL Purpose of Disbursement Robocall Candidate Name Robin Ficker 2012 Office Sought: House Disbursement For	Zip Code 32708 004 Category, Type 2012 General	Date of Disbursement M M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period 1050.00 Transaction ID: SB21.4193
Senate President State: MD District: 06 Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804	Date of Disbursement O1 07 7 2012	
•	General	Amount of Each Disbursement this Period 350.00 Transaction ID : SB21.4207
SUBTOTAL of Disbursements This Page (optional)		2450.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 62 (check only one) 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)	,	, ,
Robin Ficker 2012		
Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinsen		Date of Disbursement
Mailing Address 314 N. 12th Apt. 804		01 10 2012
City State Philadelphia PA	Zip Code 19107	Amount of Each Disbursement this Period
Purpose of Disbursement emailing design and distribution	004	360.00 Transaction ID : SB21.4208
Candidate Name Robin Ficker 2012	Categor Type	ry/
State: MD District: 06		
Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804		Date of Disbursement M M / D D / Y Y Y Y 01 15 2012
City State Philadelphia PA	Zip Code 19107	Amount of Each Disbursement this Period
Purpose of Disbursement emailing design and distribution; database development	004	522.00 Transaction ID : SB21.4209
Candidate Name Robin Ficker 2012	Categor Type	
Office Sought: House Disbursement Formary		
Full Name (Last, First, Middle Initial)		Data of Birkon and
Mailing Address 314 N. 12th Apt. 804		Date of Disbursement M M / D D / Y Y Y Y 01 23 2012
	Zip Code	Amount of Each Disbursement this Period
Philadelphia PA Purpose of Disbursement emailing design and distribution	19107	355.00
Candidate Name Robin Ficker 2012	Categor Type	
Office Sought: House Disbursement Formation		
SUBTOTAL of Disbursements This Page (optional)		1237.00

SCHEDULE B (FEC Form 3)	Use separate sch	nedule(s)	FOR LINE NUMBER: PAGE 18 OF 62 (check only one)
TEMIZED DISBURSEMENTS	for each category Detailed Summar	of the	17 18 19a 19b 20a 20b 20c X 21
Any information copied from such Reports and State or for commercial purposes, other than using the na			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Robin Ficker 2012			
Full Name (Last, First, Middle Initial) A. Internet PC Solutions, Matt Sinser	1		Date of Disbursement
Mailing Address 314 N. 12th Apt. 804			02 05 2012
City Philadelphia	State Zip Code PA 19107		Amount of Each Disbursement this Period
Purpose of Disbursement emailing design and distribution		004	380.00 Transaction ID : SB21.4211
Candidate Name Robin Ficker 2012		Category/ Type	Transaction ID: SB21.4211
Office Sought: House Senate President Disburse	ment For: 2012 Primary General Other (specify)		
State: MD District: 06 Full Name (Last, First, Middle Initial)			
Internet PC Solutions, Matt Sinser	ı		Date of Disbursement
Mailing Address 314 N. 12th Apt. 804			02 07 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Philadelphia	State Zip Code PA 19107		Amount of Each Disbursement this Period
Purpose of Disbursement charge for demand on server memory; database d		001	180.00
Candidate Name Robin Ficker 2012		Category/ Type	Transaction ID : SB21.4212
Office Sought: House Disburse	ment For: 2012 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
nternet PC Solutions, Matt Sinser	1		Date of Disbursement
Mailing Address 314 N. 12th Apt. 804			02 10 2012
City State Philadelphia PA	e Zip Code 19107		Amount of Each Disbursement this Period
Purpose of Disbursement website design; video editing	1000.00		
Candidate Name Robin Ficker 2012			Transaction ID : SB21.4213
Senate President	ment For: 2012 Primary General Other (specify)		
State: MD District: 06			4500.00
SUBTOTAL of Disbursements This Page (optional).			1560.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 OF 62 (check only one) 17			
or for commercial purposes, other than using the name and a	Any information copied from such Reports and Statements may not be sold or used by any peor for commercial purposes, other than using the name and address of any political committee				
NAME OF COMMITTEE (In Full) Robin Ficker 2012					
Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804		Date of Disbursement O2 13 2012			
City State Philadelphia PA Purpose of Disbursement	Zip Code 19107	Amount of Each Disbursement this Period			
emailing design and distribution Candidate Name Robin Ficker 2012 Office Sought: House Disbursement For	O04 Category, Type	Transaction ID : SB21.4214			
Senate President Other (s	General				
Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City State Philadelphia PA Purpose of Disbursement charge for demand on server memory	Zip Code 19107	Amount of Each Disbursement this Period 180.00			
Candidate Name Robin Ficker 2012 Office Sought: March March Disbursement For Senate March Primary Primary Disbursement Primary Primary Disbursement Disbursement	General	Transaction ID : SB21.4215			
State: MD District: 06 Full Name (Last, First, Middle Initial) Internet DC Solutions, Mott Sincer	ресіту)	Date of Disbursement			
Mailing Address 314 N. 12th Apt. 804		02 / D / Y Y Y Y Y Y 19 19 19 19 19 19 19 19 19 19 19 19 19			
	p Code 9107 engine	Amount of Each Disbursement this Period 320.00			
ontimization Candidate Name Robin Ficker 2012 Office Sought: House Disbursement For	Category/ Type	Transaction ID : SB21.4216			
Senate President State: MD District: 06	General				
SUBTOTAL of Disbursements This Page (optional)		860.00			

SC	CHEDULE B (FEC Form 3)			FOR LINE NUMBER: PAGE 20 OF 62 (check only one)
T	EMIZED DISBURSEMENTS			17 18 19a 19b 20a 20b 20c X 21
	y information copied from such Reports and Statements n for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Robin Ficker 2012			
۹.	Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen			Date of Disbursement O2 27 2012
	Mailing Address 314 N. 12th Apt. 804			02 27 2012
	City State Philadelphia PA	Zip Code 19107		Amount of Each Disbursement this Period
	Purpose of Disbursement emailing design and distribution		004	360.00 Transaction ID : SB21.4217
	Candidate Name Robin Ficker 2012		Category/ Type	
	Office Sought: House Disbursement Form	General		
3.	Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code		
	Philadelphia PA	19107		Amount of Each Disbursement this Period
Purpose of Disbursement website, social media site upkeep; server demand; search engine ontimization; database development				875.00 Transaction ID : SB21.4218
	Candidate Name Robin Ficker 2012		Category/ Type	
	Office Sought: House Disbursement Formary	General		
	Full Name (Last, First, Middle Initial)			
Э.	Internet PC Solutions, Matt Sinsen			Date of Disbursement
	Mailing Address 314 N. 12th Apt. 804			03 08 2012
	Philadelphia PA 1	ip Code 19107		Amount of Each Disbursement this Period
Purpose of Disbursement emailing design and distribution of videos, absentee ballot instructions; website upkeep 004			355.00 Transaction ID : SB21.4219	
	Robin Ficker 2012		Category/ Type	
	Office Sought: House Disbursement Formal	General		
-	UBTOTAL of Disbursements This Page (optional)			1590.00
<u> </u>	The or Dispursoments This rage (optional)			

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 OF 62 (check only one)
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b 20a 20b 20c X 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) Robin Ficker 2012		
Full Name (Last, First, Middle Initial) Internet PC Solutions, Matt Sinsen Mailing Address 314 N. 12th Apt. 804		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Philadelphia PA Purpose of Disbursement	19107	360.00
search engine optimization; website design adjustment	004	Transaction ID : SB21.4220
Candidate Name Robin Ficker 2012	Category Type	
Office Sought: House Disbursement F		
Full Name (Last, First, Middle Initial)		
3. PR Promotions, Mark Weiss Associate	S	Date of Disbursement
Mailing Address P.O. Box 34407		02 / D D / Y Y Y Y Y 2012
City State Bethesda MD	Zip Code 20827	Amount of Each Disbursement this Period
Purpose of Disbursement yard signs	004	954.00 Transaction ID : SB21.4194
Candidate Name Robin Ficker 2012	Category Type	<i>!</i> /
Office Sought: House Disbursement F		
Full Name (Last, First, Middle Initial)		
c. Radio WTOP		Date of Disbursement
Mailing Address 3400 Idaho Avenue, NW		02 / D D / Y Y Y Y Y 14 2012
City State Washington DC	Zip Code 20016	Amount of Each Disbursement this Period
Purpose of Disbursement radio advertising	004	9850.00
Candidate Name Robin Ficker 2012	Category Type	Transaction ID : SB21.4221
Office Sought: House Disbursement F Senate Prima	or: 2012	
		11164.00
SUBTOTAL of Disbursements This Page (optional)		

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Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4113 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1500.00 0.00 1500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D10^D 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4120 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D 13^D 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4121 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= м} ^D14 2011 11/6/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4123 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D16^D 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4125 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D18 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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DANS		Detailed Summary Pag	e (Check only one)
AME OF COMMITTEE (In Full) Robin Ficker 2012		Transac	tion ID : SC/10.4127
LOAN SOURCE Full Name (Last, First Robin Keith Ficker	st, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 16711 Barnesville Road			Other (specify)
City	State ZIP C	ode	
Boyds	MD 2084	1	
Original Amount of Loan	Cumulative Payment T	o Date Bala	nce Outstanding at Close of This Period
500.00		0.00	500.00
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
M 11 M / 20 D / Y 2011 Y	M M / D D / Y	11/6/12 Y 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if a	any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City	ate ZIP Code	Amount Guaranteed Outstanding:	, ,
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St.	ate ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 8 1
4. Full Name (Last, First, Middle Initial		Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (opti	onal)		500.00
TOTALS This Period (last page in this lin	e only)		9 9
Carry outstanding balance only to LINE	3, Schedule D, for this line. I	f no Schedule D, carry forw	ard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4129 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D26 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4132 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D29^D 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4134 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1029.30 0.00 1029.30 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 12^M 2011 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4137 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 12^M 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4139 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 637.25 0.00 637.25 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M 08 2011 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4142 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 950.00 0.00 950.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D21 ^D ^M 12^M 2011 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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DANS		Detailed Summary Page	
AME OF COMMITTEE (In Full) Robin Ficker 2012		Transac	ction ID : SC/10.4144
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2012
Robin Keith Ficker			Primary General
Mailing Address 16711 Barnesville Road			Other (specify)
City	State	ZIP Code	
Boyds	MD	20841	
Original Amount of Loan	Cumulative Payr	ment To Date Bala	ance Outstanding at Close of This Period
330.	00	0.00	330.00
TERMS Date Incurred	Da	te Due Interest Rate	e Secured:
M 12 / 21 / Y 2011	Y M M / D D	/ 11/6/12 Y 0.00	% (apr)
List All Endorsers or Guarantors (f any) to Loan Source		Yes No
1. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	y y w
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (o			330.00
TOTALS This Period (last page in this	line only))	
Carry outstanding balance only to LIN	E 3, Schedule D, for this	line. If no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4146 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 22 ^M 12^M 2011 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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DANS		Detailed Summary Page	(Crieck only one)
AME OF COMMITTEE (In Full)		Transact	ion ID : SC/10.4148
Robin Ficker 2012			
Robin Keith Ficker	st, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 16711 Barnesville Road			Other (specify) ▼
City	State ZIP (Code	
Boyds	MD 2084	11	
Original Amount of Loan	Cumulative Payment	To Date Balar	ace Outstanding at Close of This Period
360.0	0	0.00	360.00
TERMS Date Incurred	Date Du	ue Interest Rate	Secured:
M 12 ^M / D 30 ^D / Y Y 2011	M M / D D /	^Y 11/6/12 ^Y 0.00	% (apr)
List All Endorsers or Guarantors (if	any) to Loan Source		103 110
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle Initia	ul)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initia	ul)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed	
4. Full Name (Last, First, Middle Initia	nD	Outstanding: Name of Employer	, , , , , , , , , , , , , , , , , , , ,
, , ,			
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (opt	ional)	······	360.00
OTALS This Period (last page in this line)	ne only)		7
Carry outstanding balance only to LINE	3, Schedule D, for this line.	If no Schedule D, carry forwa	ard to appropriate line of Summary.

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

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DANS		Detailed Summary Pag	ge (check chily che)
AME OF COMMITTEE (In Full) Robin Ficker 2012		Transac	ction ID : SC/10.4154
LOAN SOURCE Full Name (Last, F Robin Keith Ficker	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 16711 Barnesville Road			Other (specify)
City	State Z	IP Code	
Boyds	MD 2	20841	
Original Amount of Loan	Cumulative Payme	ent To Date Bala	ance Outstanding at Close of This Period
350	00	0.00	350.00
TERMS Date Incurred	Date	e Due Interest Rate	e Secured:
M 01 M / D 07 D / Y Ž01Ž	Y M M / D D	11/6/12 ° 0.00	% (apr) Yes No
List All Endorsers or Guarantors (f any) to Loan Source		
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Ini	iial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (o	ptional)	· ·	350.00
TOTALS This Period (last page in this	line only)	······	7
	E 3. Schedule D. for this li	ne. If no Schedule D. carry forv	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4156 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D10^D Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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JAN5	Detailed Summary Page (Check only one) 13b
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.4158
Robin Ficker 2012	
LOAN SOURCE Full Name (Last, First, Middle Initial)	[PERSONAL FUNDS] Election: 2012 Primary
Robin Keith Ficker	General
Mailing Address 16711 Barnesville Road	Other (specify)
City State ZIP Co	de
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:
M01 ^M / D15 ^D / Y 2012 Y	11/6/12 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
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	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 Summarv.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4159 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01 ^M ^D16 Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4160 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 355.00 0.00 355.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 01^M Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Transaction ID: SC/10.4161 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 02^M Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4162 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10.17 0.00 10.17 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 02 Ž012 11/6/12 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10.17 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.

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Detailed Summary Page Transaction ID: SC/10.4163 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 410.74 0.00 410.74 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 03 Ž012 11/6/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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DANS		Detailed Summary Page	e (crieck only one)
AME OF COMMITTEE (In Full)		Transact	ion ID : SC/10.4164
Robin Ficker 2012			
LOAN SOURCE Full Name (Last, Fire	st, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary
Robin Keith Ficker			General
Mailing Address 16711 Barnesville Road			Other (specify)
City	State ZIP (Code	
Boyds	MD 2084	1 1	
Original Amount of Loan	Cumulative Payment	To Date Balar	nce Outstanding at Close of This Period
1350.00		0.00	1350.00
TERMS Date Incurred	Date Du	ue Interest Rate	Secured:
M ₀₂ M / P ₀₃ D / Y Ž01Ž Y	M M / D D /	^Y 11/6/12 ^Y 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if	any) to Loan Source		163 110
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	tate ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	tate ZIP Code	Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
3. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	tate ZIP Code	Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initia	I)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	tate ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (opt	ional)	<u> </u>	1350.00
TOTALS This Period (last page in this lin	ne only)	······ <u> </u>	. , ,
Carry outstanding balance only to LINE	3, Schedule D, for this line.	If no Schedule D, carry forw	ard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4165 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 380.00 0.00 380.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 02^M Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4166 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 180.00 0.00 180.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 02^M Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4167 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 140.00 0.00 140.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D10^D Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4168 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D10^D Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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

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Transaction ID: SC/10.4169 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 02^M Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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LOANS		Detailed Summary Pag	le (check only only)
NAME OF COMMITTEE (In Full) Robin Ficker 2012		Transac	tion ID : SC/10.4170
Robin Keith Ficker	ddle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 16711 Barnesville Road			Other (specify)
City	State ZIP Cod	de	
Boyds	MD 20841		
Original Amount of Loan 9850.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period 9850.00
3030.00	9 9	0.00	3030.00
Date Incurred M02 Date Incurred Y 2012 Y 2012	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
SUBTOTALS This Period This Page (optional).		<u> </u>	9850.00
TOTALS This Period (last page in this line only	/)	······	
Carry outstanding balance only to LINE 3, Sch	nedule D, for this line. If I	no Schedule D, carry forw	ard to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4171 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 60.00 0.00 60.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^M 02^M Ž012 11/6/12 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4172 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 180.00 0.00 180.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M ^D 17 Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4173 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 320.00 0.00 320.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 19^D ^M 02^M Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4174 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 20 Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4175 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D21 ^D ^M 02^M Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4176 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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(check only one) Detailed Summary Page Transaction ID: SC/10.4177 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 03^M Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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DANS		Detailed Summary Page	(Crieck only one)
AME OF COMMITTEE (In Full) Robin Ficker 2012		Transact	ion ID : SC/10.4178
LOAN SOURCE Full Name (Last, Robin Keith Ficker	First, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 16711 Barnesville Road			Other (specify) ▼
City	State ZIP 0	Code	
Boyds	MD 2084	1	
Original Amount of Loan	Cumulative Payment	To Date Balan	nce Outstanding at Close of This Period
875	.00	0.00	875.00
TERMS Date Incurred	Date Du	e Interest Rate	Secured:
M03 ^M / D03 ^D / Y 2012	Y M M / D D /	11/6/12	% (apr)
List All Endorsers or Guarantors (if any) to Loan Source		Yes No
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, ,
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7 7 7
SUBTOTALS This Period This Page (c	ptional)	<u> </u>	875.00
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Carry outstanding balance only to LIN	IE 3, Schedule D, for this line.	If no Schedule D, carry forwa	ard to appropriate line of Summary.

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Detailed Summary Page Transaction ID: SC/10.4179 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 355.00 0.00 355.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M 08 Ž012 0.00 11/6/12 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4180 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 95000.00 0.00 95000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 03^M Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

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Detailed Summary Page Transaction ID: SC/10.4181 NAME OF COMMITTEE (In Full) Robin Ficker 2012 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Robin Keith Ficker General Mailing Address Other (specify) \blacktriangledown 16711 Barnesville Road City State ZIP Code MD 20841 Boyds Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M ^D14 Ž012 0.00 11/6/12 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State 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.