FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation
mr robert allison smith jr

(b) Address (number and street) ☐ check if different than previously reported
402 peachtree ct

(c) City, State and ZIP Code
hebron MD 21830

2. Occupation and Name of Employer (for Individual Filers Only)
disabled veteran none

3. FEC Identification Number
C C90015421

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
☒ 24-Hour Report
☐ 48-Hour Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on MM / DD / YYYY

5. COVERING PERIOD:
FROM MM / DD / YYYY
THROUGH MM / DD / YYYY

6. TOTAL CONTRIBUTIONS ..... .00

7. TOTAL INDEPENDENT EXPENDITURES ..... .00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
mr robet allison smith jr	*[Electronically Filed]* *mr robet allison smith jr*	07/16/2015

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

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100