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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Co	ommittee	0	ffice Use Only
NAME OF COMMITTEE (in f	TYPE OR PRIN	IT <b>▼</b>	Example: If typing, ty over the lines.	/pe 12FE4M5	
Robin Ficker 20	)12				1
1					
	16711 Barnes	villo Poad			
ADDRESS (number and		oville Roau			
Check if diffe	erent				
than previous reported. (AC				MD 208	841
2. FEC IDENTIFICA	ATION NUMBER \(\nbeggreen\)	CITY		STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00506691		3. IS THIS REPORT	NEW (N) O	AMENDED (A)	
(a) Quarterly Rep April 15 ( X July 15 ( October January 3	ORT (Choose One) ports:  Quarterly Report (Q1)  Quarterly Report (Q2)  15 Quarterly Report (Q3)  31 Year-End Report (YE)  on Report (TER)	Election	OST-Election Report :  General (30G)	General (126 Special (128	in the State of
5. Covering Period	04 / 01	/ Y Y Y Y Y 2012	through	M M / D D / N	Y Y Y Y Y 2012
•	amined this Report and t	•	knowledge and belie	f it is true, correct and c	omplete.
Type or Print Name of	Treasurer Amy Marie G	Binther			
Signature of Treasurer	Amy Marie Ginther		[Electronically Filed]	Date 08	14 2012
NOTE: Submission of fa	alse, erroneous, or incompl	ete information m	ay subject the person	signing this Report to the	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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. 20 1 **3.... 3** (1.00.000 02,200

Write or Type Committee Name Robin Ficker 2012

R	eport Co	vering the Period: From:	04 01 Y Y 2012	Y Y To:	M M / D D /	Y Y Y Y Y 2012
			COLUMN This Peri		COLUMN B Election Cycle-to	
6.	Net Cor	ntributions (other than loans)				
	()	al Contributions ner than loans) (from Line 11(e))		0.00		0.00
	` '	al Contribution Refunds		0.00	, ,	0.00
	. ,	t Contributions (other than loans) btract Line 6(b) from Line 6(a))		0.00		0.00
7.	Net Op	erating Expenditures				
		al Operating Expenditures m Line 17)		0.00		1383.17
		al Offsets to Operating penditures (from Line 14)		0.00		0.00
	. ,	t Operating Expenditures btract Line 7(b) from Line 7(a))	7 1 7	0.00		1383.17
8.		n Hand at Close of ng Period (from Line 27)	7 7 7	0.00		
9.	the Cor	nnd Obligations Owed <b>TO</b> nmittee (Itemize all on le C and/or Schedule D)		0.00		
10.	the Cor	and Obligations Owed <b>BY</b> nmittee (Itemize all on le C and/or Schedule D)		59558.60		

#### 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

PAGE 3 / 57

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Robin Ficker 2012

04 01 2012 06 30 2012 Report Covering the Period: From: To: **COLUMN B COLUMN A** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)...... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL of contributions 0.00 0.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate ..... TOTAL CONTRIBUTIONS (other than loans) 0.00 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the

	(c)	All Other Loans TOTAL LOANS (add Lines 13(a) and (b))
14.	EXF	FSETS TO OPERATING PENDITURES funds, Rebates, etc.)
15.	•	HER RECEIPTS idends, Interest, etc.)

Candidate.....

	(Bividorido, intoroot, otol, illinininini
16.	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

						Т		0.00	٦
		7			7		_	-	
_	-	-	-	-	-	-	-	-	÷
		7			7			0.00	
							23	22.00	٦

2322.00

2322.00

0.00

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	7			7			
	-	-	-	-		-	_
							0.00
	7			9			0.00
	_				1	358	96.46
	 7	-	-	9			/B

135896.46

135896.46

0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ts PAGE 4 / 57

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	1383.17
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	76337.86	76337.86
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	76337.86	76337.86
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	9 9	
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	2322.00	58175.43
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	78659.86	135896.46
	III. CASH SI	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	PRTING PERIOD	76337.86
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	2322.00
25.	SUBTOTAL (add Line 23 and Line 24)		78659.86
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	78659.86
	CASH ON HAND AT CLOSE OF REPORTIN		0.00

## S

SCHEDULE A (FEC Form 3)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 57 (check only one)		
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 11d 11d 12 X 13a 13b 14 15		
				person for the purpose of soliciting contributions e to solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) Robin Ficker 2012					
<u> </u>	Full Name (Last, First, Middle Initial) Robin Keith Ficker			Date of Receipt		
Λ.	Mailing Address 16711 Barnesville Road			04 01 2012		
	City	State	Zip Code	Transaction ID : SA13A.4252		
	Boyds	MD	20841	_		
	FEC ID number of contributing federal political committee.	C H4	MD08171	Amount of Each Receipt this Period  950.00		
	Name of Employer self	Occupation attorney	١	payment for final Robocall		
	Receipt For: 2012  Primary General Other (specify)	Election C	ycle-to-Date 134524.46			
— В.	Full Name (Last, First, Middle Initial)  Robin Keith Ficker			Date of Receipt		
В.	Mailing Address 16711 Barnesville Road			04 02 Y Y 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.4253		
	FEC ID number of contributing federal political committee.		MD08171	Amount of Each Receipt this Period		
	Name of Employer	Occupation	1	1372.00		
	self	attorney		payment for final campaign messaging		
	Receipt For: 2012  Primary General Other (specify)	Election C	ycle-to-Date 135896.46			
_	Full Name (Last, First, Middle Initial)			Date of Receipt		
C.	Mailing Address			M M / D D / Y 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	1			
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date			
s	UBTOTAL of Receipts This Page (optional)			2322.00		

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

2322.00

		(FEC Form SBURSEMENT	-	Use separate scl for each categor Detailed Summar	of the	FOR LINE NUMBER: PAGE 6 OF 57 (check only one)  17 18 X 19a 19b 20a 20b 20c 21
		urposes, other than us				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
$\rangle$	Robin Ficke					
۹.	Full Name (Last, I Robin Keith	First, Middle Initial) Ficker	Date of Disbursement			
	Mailing Address	16711 Barnesville Roa	d			04 06 2012
	City Boyds		State MD	Zip Code 20841		Amount of Each Disbursement this Period
		rsement -withdrawal of bank ac	count balance		009	76337.86  Transaction ID : SB19A.4255
	Candidate Name				Category/ Type	
	Office Sought: State: MD	House Senate President District: 06	Disbursement For Primary Other (s	General		
3.	Full Name (Last, I	First, Middle Initial)				Date of Disbursement
	Mailing Address					M M / D D / Y Y Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbu	rsement				1,
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General		
	State: Full Name (Last, I	First, Middle Initial)				
Э.	Mailing Address					Date of Disbursement
	City		State Zi	p Code		Amount of Each Disbursement this Period
Purpose of Disbursement						The state of Each Dispulsement this remove
Candidate Name  Category/ Type					, , , , , , , , , , , , , , , , , , , ,	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
	State:	District:				
s	<b>UBTOTAL</b> of Disb	ursements This Page	(optional)			76337.86

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

76337.86

SCHEDULE B (FEC I TEMIZED DISBURSE	•	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 7 OF 57 (check only one)		
		ay not be sold or	used by any	20a 20b 20c X 21  person for the purpose of soliciting contributions		
		address of any poli	tical committ	ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Fu Robin Ficker 2012	ıll)					
Full Name (Last, First, Middle A. Gravis Marketing	Date of Disbursement					
Mailing Address 910 Belle Ave	e., Suite 1042			04 01 2012		
City	State	Zip Code		Amount of Each Disbursement this Period		
Winter Springs Purpose of Disbursement	FL	32708		950.00		
004				Transaction ID : SB21.4244		
Candidate Name			Category/ Type			
Office Sought: House Senate Preside	e Primary	General				
State: District:	1-92-10					
Full Name (Last, First, Middle Internet PC Solution	,			Date of Disbursement		
Mailing Address 314 N. 12th Apt. 804				04 02 7 2012		
City Philadelphia	State PA	Zip Code 19107		Amount of Each Disbursement this Period		
Purpose of Disbursement	174	19107		1372.00		
004 Candidate Name			Category/ Type	Transaction ID : SB21.4245		
Office Sought: House Senate Preside	Primary	General				
State: District:	1.11.1					
Full Name (Last, First, Middle	initiai)			Date of Disbursement		
Mailing Address				M M / D D / Y Y Y		
City	Amount of Each Disbursement this Period					
Purpose of Disbursement	T L,					
Candidate Name			Category/ Type			
Office Sought: House Senate Preside	e Primary	General				
State: District:						
				2322.00		
SUBTOTAL of Disbursements T	his Page (optional)			2322.00		
				2322.00		

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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JAN5	Detailed Summary Page (Check Only One) 13b
AME OF COMMITTEE (In Full) Robin Ficker 2012	Transaction ID : SC/10.4113
LOAN SOURCE Full Name (Last, First, Middle Initial) Robin Keith Ficker	[PERSONAL FUNDS] Election: 2012   Primary   General
Mailing Address 16711 Barnesville Road	Other (specify)
City State ZIP Code	e
Boyds MD 20841	
Original Amount of Loan Cumulative Payment To D	Date Balance Outstanding at Close of This Period 0.00 1500.00
	Interest Rate Secured:  1/6/12  0.00  % (apr)  Yes No
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)	Name of Employer
, , , ,	Occupation
City State 7IP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	1500.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no	7 7

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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DANS			Detailed Summary Pag	
AME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4120
Robin Ficker 2012				
Robin Keith Ficker	t, First, Middle	e Initial)	[PERSONAL FUNDS]	Election: 2012  Primary  General
Mailing Address 16711 Barnesville Road				Other (specify) ▼
City	St	ate ZIP Co	de	
Boyds		MD 20841		
Original Amount of Loan	(	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
7 7	100.00		0.00	100.00
Date Incurred  Man / Date Incurred  Man / Date Incurred	Y " Y	Date Due	Interest Rate 11/6/12 0.00	% (apr)
List All Endorsers or Guarantor	s (if any) to L	oan Source		Yes No
1. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,
3. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 9 1
SUBTOTALS This Period This Page	e (optional)		······	100.00
FOTALS This Period (last page in the	his line only)			
Carry outstanding balance only to	LINE 3. Sched	ule D. for this line. If	no Schedule D. carry forw	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= м</sub> <sup>D</sup>14 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 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> <sup>D</sup>16<sup>D</sup> 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)..... 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> <sup>D</sup>18 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)..... 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

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4127 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 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> 20 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> <sup>D</sup>26 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)..... 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

FOR LINE NUMBER: (check only one)

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57

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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= М</sub> <sup>D</sup>29<sup>D</sup> 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)..... 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

FOR LINE NUMBER:

**PAGE** 

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(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 <sup>M</sup> 12<sup>M</sup> 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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X	13a
	13b

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 <sup>M</sup> 12<sup>M</sup> 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)..... 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 13b 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: <sup>M</sup> 12<sup>M</sup> 08 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 State ZIP Code City 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.

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(check only one) 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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 950.00 0.00 950.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>21 <sup>D</sup> <sup>M</sup> 12<sup>M</sup> 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.

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Detailed Summary Page 13b Transaction ID: SC/10.4144 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 330.00 0.00 330.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>21 <sup>D</sup> <sup>M</sup> 12<sup>M</sup> 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)..... 330.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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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 <sup>M</sup> 12<sup>M</sup> 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.

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Detailed Summary Page Transaction ID: SC/10.4148 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 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>30 <sup>M</sup> 12<sup>M</sup> 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)..... 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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Transaction ID: SC/10.4154 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 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 <sup>M</sup> 01 <sup>M</sup> 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)..... 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.

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 01 <sup>M</sup> <sup>D</sup>10<sup>D</sup> 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)..... 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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Detailed Summary Page Transaction ID: SC/10.4158 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 522.00 0.00 522.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 01 <sup>M</sup> <sup>D</sup> 15 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)..... 522.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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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: <sup>M</sup> 01 <sup>M</sup> <sup>D</sup>16 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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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 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: 23 <sup>M</sup> 01<sup>M</sup> 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)..... 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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 <sup>M</sup> 02<sup>M</sup> 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)..... 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: <sup>M</sup> 02<sup>M</sup> 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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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 410.74 0.00 410.74 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> 03 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)..... 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.

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Detailed Summary Page Transaction ID: SC/10.4164 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 1350.00 0.00 1350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> 03 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)..... 1350.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 380.00 0.00 380.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 <sup>M</sup> 02<sup>M</sup> 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)..... 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.

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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 <sup>M</sup> 02<sup>M</sup> 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)..... 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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AME OF COMMITTEE (In Full) Robin Ficker 2012		Transacti	ion ID : SC/10.4167
LOAN SOURCE Full Name (Last, F	irst, 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 Balan	ce Outstanding at Close of This Period
TERMS  Date Incurred  M 02 / D 10 / Y 2012	Date Du	Interest Rate  11/6/12  Interest Rate  0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (  1. Full Name (Last, First, Middle In		Name of Employer	
Mailing Address	,	Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,
2. Full Name (Last, First, Middle Ini	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Ini	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Ini	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,
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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: <sup>M</sup> 02<sup>M</sup> <sup>D</sup>10<sup>D</sup> 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.

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 13<sup>D</sup> <sup>M</sup> 02<sup>M</sup> 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)..... 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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Detailed Summary Page Transaction ID: SC/10.4170 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 9850.00 0.00 9850.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> <sup>D</sup>14 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)..... 9850.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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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: <sup>D</sup> 15 <sup>M</sup> 02<sup>M</sup> 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)..... 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.

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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 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: <sup>M</sup> 02<sup>M</sup> <sup>D</sup> 17 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)..... 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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 320.00 0.00 320.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 19<sup>D</sup> <sup>M</sup> 02<sup>M</sup> 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)..... 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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AME OF COMMITTEE (In Full) Robin Ficker 2012		Transaction ID : SC/10.4174
LOAN SOURCE Full Name (La Robin Keith Ficker	st, First, Middle Initial)	[PERSONAL FUNDS] Election: 2012   Primary   General
Mailing Address 16711 Barnesville Road		Other (specify) ▼
City	State	ZIP Code
Boyds	MD	20841
Original Amount of Loan	Cumulative Pa	Payment To Date Balance Outstanding at Close of This Period 1050.00
TERMS  Date Incurred  M 02 / 20 / Y 20	Ž Y	Date Due Interest Rate Secured:  D / Y 11/6/12 Y 0.00 % (apr) Yes No
List All Endorsers or Guaranto  1. Full Name (Last, First, Middl		e Name of Employer
Mailing Address	,	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle	Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle	Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle	Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Pag	e (optional)	1050.00
TOTALS This Period (last page in		7 7 7
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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>21 <sup>D</sup> <sup>M</sup> 02<sup>M</sup> 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)..... 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.

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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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 02<sup>M</sup> 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)..... 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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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 <sup>M</sup> 03<sup>M</sup> 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/10.4178 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 875.00 0.00 875.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> 03 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)..... 875.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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(check only one) 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: <sup>M</sup> 03<sup>M</sup> 08 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)..... 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 76337.86 18662.14 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 13<sup>D</sup> <sup>M</sup> 03<sup>M</sup> 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)..... 18662.14 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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**LOANS** (check only one) 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 Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 360.00 0.00 360.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> <sup>D</sup>14 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)..... 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/10.4246 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 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 19<sup>D</sup> <sup>M</sup> 03<sup>M</sup> 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)..... 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.

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Detailed Summary Page Transaction ID: SC/10.4247 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 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 03<sup>M</sup> 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)..... 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/10.4248 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 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 22 <sup>M</sup> 03<sup>M</sup> 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)..... 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.

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Transaction ID: SC/10.4249 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 2020.00 0.00 2020.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>24<sup>D</sup> <sup>M</sup> 03<sup>M</sup> 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)..... 2020.00 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/10.4250 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 1570.00 0.00 1570.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>24<sup>D</sup> <sup>M</sup> 03<sup>M</sup> 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)..... 1570.00 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/10.4251 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 1050.00 0.00 1050.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>24<sup>D</sup> <sup>M</sup> 03<sup>M</sup> 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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Transaction ID: SC/10.4254 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 950.00 0.00 950.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>26 <sup>M</sup> 03<sup>M</sup> 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)..... 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

FOR LINE NUMBER: (check only one)

PAGE

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	13h

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Detailed Summary Page Transaction ID: SC/10.4252 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 950.00 0.00 950.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 <sup>M</sup> 04 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)..... 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

FOR LINE NUMBER: (check only one)

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Detailed Summary Page 13b Transaction ID: SC/10.4253 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 1372.00 0.00 1372.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 04 02 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)..... 1372.00 TOTALS This Period (last page in this line only)..... 59558.60 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.