

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> <b>TIMMERMAN FOR CONGRESS COMMITTEE</b>																							
<b>ADDRESS</b> (number and street) 11140 ROCKVILLE PIKE #100-298																							
<b>CITY, STATE, and ZIP CODE</b> ROCKVILLE MD 20895																							
<b>2. NAME OF CANDIDATE</b> Kenneth Timmerman		<b>3. OFFICE SOUGHT</b> (State and District) House MD 08																					
<b>4. FEC IDENTIFICATION NUMBER</b> C00510891																							
<b>5. IS THIS AN AMENDMENT?</b> <input type="checkbox"/> NO, THIS IS A NEW FILING <input checked="" type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON 10 / 25 / 2012																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; padding: 5px; vertical-align: top;"> <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>            Carolyn E Darne             9921 Mainsail Drive             Gaithersburg MD 20879         </td> <td style="width: 20%; padding: 5px; vertical-align: top;">           Name of Employer            Retired   <b>Transaction ID : WFT20129251821-1</b>            Occupation            Teacher         </td> <td style="width: 15%; padding: 5px; vertical-align: top;">           Date (month, day, year)             10/23/2012         </td> <td style="width: 20%; padding: 5px; vertical-align: top;">           Amount             1800.00         </td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"> <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>            James A Burns             9921 Mainsail Drive             Gaithersburg MD 20879         </td> <td style="padding: 5px; vertical-align: top;">           Name of Employer            Retired   <b>Transaction ID : WFT20129251823-1</b>            Occupation            Teacher         </td> <td style="padding: 5px; vertical-align: top;">           Date (month, day, year)             10/23/2012         </td> <td style="padding: 5px; vertical-align: top;">           Amount             1900.00         </td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"> <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> </td> <td style="padding: 5px; vertical-align: top;">           Name of Employer              Occupation         </td> <td style="padding: 5px; vertical-align: top;">           Date (month, day, year)         </td> <td style="padding: 5px; vertical-align: top;">           Amount         </td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"> <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> </td> <td style="padding: 5px; vertical-align: top;">           Name of Employer              Occupation         </td> <td style="padding: 5px; vertical-align: top;">           Date (month, day, year)         </td> <td style="padding: 5px; vertical-align: top;">           Amount         </td> </tr> <tr> <td style="padding: 5px; vertical-align: top;"> <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> </td> <td style="padding: 5px; vertical-align: top;">           Name of Employer              Occupation         </td> <td style="padding: 5px; vertical-align: top;">           Date (month, day, year)         </td> <td style="padding: 5px; vertical-align: top;">           Amount         </td> </tr> </table>				<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Carolyn E Darne  9921 Mainsail Drive  Gaithersburg MD 20879	Name of Employer Retired  <b>Transaction ID : WFT20129251821-1</b> Occupation Teacher	Date (month, day, year)  10/23/2012	Amount  1800.00	<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> James A Burns  9921 Mainsail Drive  Gaithersburg MD 20879	Name of Employer Retired  <b>Transaction ID : WFT20129251823-1</b> Occupation Teacher	Date (month, day, year)  10/23/2012	Amount  1900.00	<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer   Occupation	Date (month, day, year)	Amount	<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer   Occupation	Date (month, day, year)	Amount	<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>	Name of Employer   Occupation	Date (month, day, year)	Amount
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<b>SIGNATURE (optional)</b> David Richison  <div style="text-align: right;">[Electronically Filed]</div>		<b>DATE</b> 10/26/2012																					
<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																							

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

## FEC FORM 6

(Revised 07/2011)