

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED 2012 APR 17 AM 10:29 FEDERAL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 DUANE JACKSON FOR CONGRESS

ADDRESS (number and street) PO BOX 142 16 LAKE DRIVE BUCHANAN NY 10511-0412

2. FEC IDENTIFICATION NUMBER C100516286 3. IS THIS REPORT NEW (N) OR AMENDED (A) NY 18

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 03/10/2012 through 04/15/2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Antoinette R Nahlman Signature of Treasurer Antoinette R Nahlman Date 04/15/2012

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

12030782639

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

Duane Jackson For Congress

Report Covering the Period:

From:

03 / 10 / 2012

To:

04 / 15 / 2012

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

1,400.00

(b) Total Contribution Refunds
(from Line 20(d))

0

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

1,400.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

5,343.80

(b) Total Offsets to Operating
Expenditures (from Line 14)

0

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

5,343.80

8. Cash on Hand at Close of
Reporting Period (from Line 27)

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0

For further information contact:

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

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

12030782640

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

03 ' 10 ' 2012

To:

04 ' 15 ' 2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

25000

(ii) Unitemized.....

60000

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

980000

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

85000

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

980000

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

980000

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1165000
1165000

12030782641

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

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

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

NAME OF COMMITTEE (In Full)
Duane Jackson For Congress

Full Name (Last, First, Middle Initial)
A. Henry + Debbie Hachel

Mailing Address
No ADDRESS TD BANK Ch #16246

City State Zip Code

Date of Receipt
03 / 12 / 2012

FEC ID number of contributing federal political committee.
C00516286

Amount of Each Receipt this Period
250.00

Name of Employer Occupation
N/A

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period

Name of Employer Occupation

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period

Name of Employer Occupation

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date

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

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

12030782642

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Duane JACKSON

Full Name (Last, First, Middle Initial)

A. Parking		Date of Disbursement
Mailing Address 200 PARK I		03 / 13 / 2012
City NY	State NY	Zip Code
Purpose of Disbursement Parking Fee	Category/Type	Amount of Each Disbursement this Period 50.00
Candidate Name Duane JACKSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 18	

B. shell oil		Date of Disbursement
Mailing Address SAS FOR CAR		03 / 13 / 2012
City Bachawan	State NY	Zip Code 10511
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 60.00
Candidate Name Duane JACKSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

C. Getty SAS		Date of Disbursement
Mailing Address		03 / 14 / 2012
City Peekskill	State NY	Zip Code 10566
Purpose of Disbursement gas for car	Category/Type	Amount of Each Disbursement this Period 75.00
Candidate Name Duane JACKSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 18	

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

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

12030782643

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 11

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Duane Jackson For Congress

Full Name (Last, First, Middle Initial)

A. **P O**
Mailing Address

Date of Disbursement

03 / 19 / 2012

City **Buchanan** State **NY** Zip Code **10511**

Amount of Each Disbursement this Period

21.10

Purpose of Disbursement
FCC Filing Postage

Candidate Name
Duane JACKSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **18**

Full Name (Last, First, Middle Initial)

B. **Walmart**
Mailing Address

Date of Disbursement

03 / 19 / 2012

City **COVINGTON TOWN** State **NY** Zip Code **10567**

Amount of Each Disbursement this Period

1547

Purpose of Disbursement
Supplies

Candidate Name
Duane JACKSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **18**

Full Name (Last, First, Middle Initial)

C. **WALMART**
Mailing Address

Date of Disbursement

03 / 23 / 2012

City **COVINGTON TOWN** State **NY** Zip Code **10567**

Amount of Each Disbursement this Period

13.45

Purpose of Disbursement
Supplies

Candidate Name
Duane JACKSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **18**

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12030782644

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

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

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 11

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Duane Jackson For Congress

Full Name (Last, First, Middle Initial)

A. OFFICE MAY

Date of Disbursement

03 / 23 / 2012

Mailing Address

CORTLAND TOWN CTR

City

MOHEGAN LAKE NY 10567

Purpose of Disbursement

Calendars

Amount of Each Disbursement this Period

12.86

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY District: 12

Full Name (Last, First, Middle Initial)

B. Dollar Tree

Date of Disbursement

03 / 33 / 2013

Mailing Address

City

Peekskill NY 10566

Purpose of Disbursement

Chip Boards

Amount of Each Disbursement this Period

40.00

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY District: 12

Full Name (Last, First, Middle Initial)

C. Shell

Date of Disbursement

03 / 24 / 2012

Mailing Address

City

Peekskill NY 10566

Purpose of Disbursement

GAS

Amount of Each Disbursement this Period

110.00

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY District: 12

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

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

12030782645

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>4</u> OF <u>11</u>	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Duane Jackson

Full Name (Last, First, Middle Initial) A. Ku YAY Restaurant		Date of Disbursement 03 / 28 / 2012
Mailing Address		Amount of Each Disbursement this Period 102.15
City Poughkeepsie	State NY	
Purpose of Disbursement Meals	Zip Code	Candidate Name Duane Jackson
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) B. Parking Fee		Date of Disbursement 03 / 28 / 2012
Mailing Address		Amount of Each Disbursement this Period \$37.89
City Poughkeepsie	State NY	
Purpose of Disbursement	Zip Code	Candidate Name Duane Jackson
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12
Full Name (Last, First, Middle Initial)		

Full Name (Last, First, Middle Initial) C. VISTA Print		Date of Disbursement 03 / 29 / 2012
Mailing Address Email Account		Amount of Each Disbursement this Period 30.10
City	State	
Purpose of Disbursement Business CARD Fee	Zip Code	Candidate Name Duane Jackson
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 12
Full Name (Last, First, Middle Initial)		

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

12030782646

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <u>3</u> OF <u>11</u>			
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Duane Jackson for Congress

A. Full Name (Last, First, Middle Initial) TRUOTCO

Mailing Address

City Peekskill State NY Zip Code 10511

Purpose of Disbursement BANK Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 19

Date of Disbursement: 03 / 30 / 2012

Amount of Each Disbursement this Period: 50

B. Full Name (Last, First, Middle Initial) Dollar Tree

Mailing Address

City Peekskill State NY Zip Code 10566

Purpose of Disbursement SUPPLIES

Candidate Name Duane Jackson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 19

Date of Disbursement: 03 / 30 / 2012

Amount of Each Disbursement this Period: 32.05

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

Mailing Address

City Peekskill State NY Zip Code 10566

Purpose of Disbursement Pens

Candidate Name Duane Jackson

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 19

Date of Disbursement: 03 / 30 / 2012

Amount of Each Disbursement this Period: 9.66

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12030782647

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

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

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 11

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Duane Jackson For Congress

Full Name (Last, First, Middle Initial)

A. **LISA POSEY**

Mailing Address

Date of Disbursement

03 / 31 / 2012

City **NY** State **NY** Zip Code

Amount of Each Disbursement this Period

115.00

Purpose of Disbursement
FUND RAISER

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: **NY** District: **12**

Full Name (Last, First, Middle Initial)

B. **US POST OFFICE**

Mailing Address

Date of Disbursement

04 / 02 / 2012

City **Peekskill** State **NY** Zip Code **10566**

Amount of Each Disbursement this Period

132.00

Purpose of Disbursement
mail fee

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: **NY** District: **18**

Full Name (Last, First, Middle Initial)

C. **OFFICE MAIL**

Mailing Address

CORTLAND TOWN CTR

Date of Disbursement

04 / 15 / 2012

City **Mohegan** State **LAKENY** Zip Code **10566**

Amount of Each Disbursement this Period

74.00

Purpose of Disbursement
toner

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: **NY** District: **12**

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

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

12030782648

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

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

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NAME OF COMMITTEE (In Full)
Duane Jackson for Congress

Full Name (Last, First, Middle Initial) A. Lisa Posey		Date of Disbursement 04 06 2012
Mailing Address		Amount of Each Disbursement this Period 1,000.00
City	State Zip Code	
Purpose of Disbursement FUND RAISER	<input type="checkbox"/>	Candidate Name Duane Jackson
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: Ny District: 18	Category/Type	

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement 04 06 2012
Mailing Address		Amount of Each Disbursement this Period 52.92
City	State Zip Code	
Purpose of Disbursement GAS	<input type="checkbox"/>	Candidate Name Duane Jackson
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 18	Category/Type	

Full Name (Last, First, Middle Initial) C. Post Office		Date of Disbursement 06 05 2012
Mailing Address		Amount of Each Disbursement this Period 50.00
City	State Zip Code	
Purpose of Disbursement Box Fee	<input type="checkbox"/>	Candidate Name Duane Jackson
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 18	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	<input type="checkbox"/>
TOTAL This Period (last page this line number only)	<input type="checkbox"/>

12030782649

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

A. Debra DANZEW
 Mailing Address Montrose VA Hosp
 City Rothman State NJ Zip Code 07011
 Purpose of Disbursement Petitions
 Candidate Name Duane Jackson
 Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify)

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Stephanie Foxworth
 Mailing Address 936 Orchard St
 City Peekskill State NJ Zip Code 10566
 Purpose of Disbursement Petitions
 Candidate Name Duane Jackson
 Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify)

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

175.00

Full Name (Last, First, Middle Initial)

C. Mahika Garret
 Mailing Address 255 Orchard Street
 City Peekskill State NJ Zip Code 10566
 Purpose of Disbursement Petition
 Candidate Name Duane Jackson
 Office Sought: House Senate President
 Disbursement For: Primary General
 Other (specify)

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

125.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12030782650

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 1

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Duane JACKSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OFFICE MAX

Mailing Address CORTLANDT TOWN CTR

City ROCKAWAY HAVEN State MAK Zip Code NY 10561

Purpose of Disbursement COPIES

Candidate Name DUANE JACKSON Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 12

Date of Disbursement

04 / 12 / 2012

Amount of Each Disbursement this Period

420

B. DOLLAR TREE

Mailing Address

City State Zip Code

Purpose of Disbursement SUPPLIES

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 12

Date of Disbursement

04 / 12 / 2012

Amount of Each Disbursement this Period

640

C. TROY WILLIAMS

Mailing Address MONTROUSE VA Hosp

City ROCKAWAY HAVEN State NY Zip Code 10561

Purpose of Disbursement helped petition

Candidate Name Duane JACKSON Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 12

Date of Disbursement

04 / 12 / 2012

Amount of Each Disbursement this Period

250.00

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

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

.....

.....

12030782651

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Duane JACKSON For Congress

Full Name (Last, First, Middle Initial)

A. OFFICEMAT

Mailing Address

PORTLAND TOWN CTN

City

MORRIS AV LAKE NY 10506

Purpose of Disbursement

COPIES

Candidate Name

Duane JACKSON

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 18

Date of Disbursement

04 / 12 / 2013

Amount of Each Disbursement this Period

480

Full Name (Last, First, Middle Initial)

B. Dollar Tree

Mailing Address

City

Packskill NY 10566

Purpose of Disbursement

Candidate Name

Duane JACKSON

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 18

Date of Disbursement

04 / 12 / 2013

Amount of Each Disbursement this Period

640

Full Name (Last, First, Middle Initial)

C. Troy Willtars

Mailing Address

Mantrose VA

City

Packskill NY 10561

Purpose of Disbursement

Petition Work

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 18

Date of Disbursement

04 / 12 / 2013

Amount of Each Disbursement this Period

35000

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

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

12030782652

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)

Duane Jackson For Congress

Full Name (Last, First, Middle Initial)

A. Stephanie Foyworth

Mailing Address: **930 Orchard Street**

City: **Peeckskill** State: **NY** Zip Code: **10565**

Purpose of Disbursement: **Petition**

Candidate Name: **Duane Jackson** Category/Type:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **NY** District: **12**

Date of Disbursement

04 / 14 / 2012

Amount of Each Disbursement this Period

75.00

B. Carmen Ramirez

Mailing Address: **19 Doris Lee Drive**

City: **Cortlandt Manor** State: **NY** Zip Code: **10569**

Purpose of Disbursement: **Petition**

Candidate Name: **Duane Jackson** Category/Type:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **NY** District: **10**

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

240.00 **240.00** **AC**

C. John Deboy

Mailing Address: **Montrose VA Hosp**

City: **Buchanan** State: **NY** Zip Code: **10564**

Purpose of Disbursement: **Petition work**

Candidate Name: **Duane Jackson** Category/Type:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **NY** District: **12**

Date of Disbursement

04 / 15 / 2012

Amount of Each Disbursement this Period

100.00

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

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

12030782653

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Duane JACKSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LISA ROSEY

Mailing Address

City State Zip Code

Purpose of Disbursement
FUND RAISE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **13**

Date of Disbursement

06 / 08 / 2013

Amount of Each Disbursement this Period

1500.00 *ALL*
150.00

Full Name (Last, First, Middle Initial)

B. MALIKH GARRET

Mailing Address

City State Zip Code
ROCKVILLE NY 10566

Purpose of Disbursement
PETITION

Candidate Name

Duane JACKSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **13**

Date of Disbursement

04 / 25 / 2012

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Duane JACKSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **NY** District: **A**

Date of Disbursement

04 / 08 / 2012

Amount of Each Disbursement this Period

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

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

12030782654

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full)
Duane JACKSON For Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)
Duane M JACKSON

Mailing Address
6 LAKE DRIVE

Election:
 Primary
 General
 Other (specify) ▼

City State ZIP Code
Buchanan NY 10514-0142

Original Amount of Loan 9800.00	Cumulative Payment To Date	Balance Outstanding at Close of This Period
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TERMS

Date Incurred M M / D D / Y Y Y Y Y	Date Due M M / D D / Y Y Y Y Y	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------------------	--------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	<input type="text"/>
TOTALS This Period (last page in this line only).....	9800.00

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

12030782655

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date
4/16/12
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]

PREPARER

4/16/12
DATE PREPARED

12030782656